



How Physical Therapy Can Help "Heel" Your Foot Pain: A Brief Overview Of A Plantar Fasciitis

By: Lauren Ramondini, DPT, for All-Care Physical Therapy Center's Barnegat Location

What is plantar fasciitis?

Plantar Fasciitis is a degeneration of a thick band of tissue called the plantar fascia. This band of connective tissue is on the plantar surface (bottom) of the foot. It connects the heel bone to the bones of the toes also known as the metatarsophalangeal joints. It also helps to form the arch on the inside of the foot. The plantar fascia plays an important role in walking and running and serves as a shock absorber for the foot. When the plantar fascia becomes irritated it can become weak, swollen and inflamed causing pain on the bottom of the foot and in the heel. It is the most common cause of heel pain.



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area near the heel. Typically the pain is at its worst in the morning after getting up out of bed and taking your first few steps. Many also complain of pain when trying to walk after they have been sitting for long periods of time. The pain may decrease as the day goes on but can also increase after periods of prolonged walking or standing. Pain during the night and complaints of numbness or tingling in the foot are not common symptoms of Plantar Fasciitis and may be related to a different foot problem.

What causes plantar fasciitis?

When we start to walk, our heel makes initial contact with the ground. After the heel makes contact, the tibia (the larger bone in the lower leg) turns inward and the foot flattens to make full contact with the floor. This flattening of the foot stretches the plantar fascia and flattens the arch. This ultimately helps to absorb shock and provide stability when walking on uneven surfaces. Repeated strain to the plantar fascia can cause tiny tears in the tissue which leads to pain and swelling. Some people are more prone to suffering from Plantar Fasciitis than others. Here are some of the risk factors:

- Excessive pronation (arch collapsing) when walking.
- Decreased range of motion in the ankle & tightness in the Achilles Tendon (heel).
- Being overweight.
- Having a high arch or flat foot.

- Standing, walking or running for long periods of time on hard surfaces.
- Wearing ill-fitting or worn shoes.
- History of heel spurs

How is Plantar Fasciitis Diagnosed?

The diagnosis is made by physical examination and subjective history. The doctor will typically watch you stand and walk, and examine the positioning of your foot. He or she will also ask about your symptom history and if you are involved in any activities that require prolonged standing or walking. An x-ray may be taken to rule out any problems with the bones of your foot.

What is the Treatment?

Early recognition of Plantar Fasciitis tends to provide the shortest course of treatment and the greatest possibility of eliminating symptoms. There is no single cure for Plantar Fasciitis but there are many conservative ways that can make your foot feel better:

- Rest and decreasing any activities that cause pain in your foot.
- Reduce pain and swelling by using ice & anti-inflammatories.
- Proper foot wear: making sure your shoes have adequate arch support and enough cushioning in the heel.
- Orthotics: pre-fabricated or custom made (this can be discussed with your doctor or your Physical Therapist).
- Weight loss.
- Physical Therapy.

Can Physical Therapy help?

Physical Therapists are trained to evaluate and treat Plantar Fasciitis. They use manual techniques and exercises to help increase flexibility and range of motion in the plantar fascia, calf muscles, and the ankle joint. In addition, ice and ultrasound can be used to help decrease inflammation and pain. A home exercise program is also given so a patient can supplement the treatment in the clinic independently at home.

At All-Care Physical Therapy the Physical Therapists have the knowledge and experience for treating Plantar Fasciitis. They will develop treatment programs based on a patient's individual symptoms and goals to help eliminate pain and get the patient back on his or her feet.

To make an appointment at the Barnegat facility, please call 609-660-1900.



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Lauren earned her Doctorate of Physical Therapy from the joint program of UMDNJ/Rutgers-Camden in May 2011. While at UMDNJ her research group was chosen to present at APTA's Annual Conference Poster Day on Therapeutic Exercise Recommendations for Post-Partum Pelvic Girdle Pain. Prior to graduate school she attended the University of Delaware where she received her undergraduate degree in Exercise Physiology.

Lauren has clinical experience in acute & sub-acute care, outpatient orthopedics and sports medicine. Her areas of interest include outpatient orthopedics and sports medicine, especially in the adolescent population. Lauren values patient-centered care and the use of evidence based practice in the clinical care setting. She believes that each patient's treatment program should be unique and specific to their needs. She has been an active member of the APTA since March of 2011.



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