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AMERICAN ORTHOPAEDIC
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Treating Plantar Fasciitis

Before considering surgery, try other options first

Plantar fasciitis (plan-ter fash-ee-eye-tiss) is pain in the heel or arch of the foot. It is caused by irritation of the plantar fascia—the band of tissue that goes from the heel to the ball of the foot.

Plantar fasciitis is a common condition. It is also called jogger's heel. The main symptom is pain in the heel when you stand up after sleeping or resting. The pain usually gets better when you walk around.

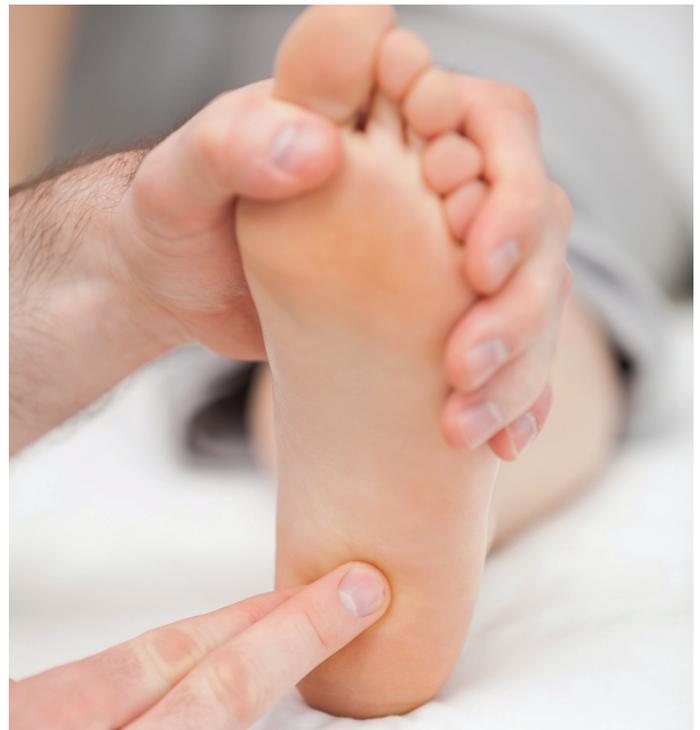
This condition takes time to heal. It usually goes away on its own in less than six months. But some doctors recommend surgery. Surgery can lead to complications, and it doesn't always work. Here are some things you should know before you consider surgery.

Plantar fasciitis is usually easy to diagnose.

Your health care provider can usually diagnose it with a physical exam of the foot. You don't need X-rays, unless you have symptoms for longer than six months.

Non-surgical treatments often work best.

- First try simple stretches and exercises to strengthen the foot. (See Advice column.)
- Wear sturdy, lace-up shoes with good arch support and heel cushioning.



Your doctor might also suggest:

- **Anti-inflammatory drugs**, such as ibuprofen or naproxen.
- **Wearing a splint to bed.** This keeps your plantar fascia from getting tighter at night.
- **Over-the-counter arch supports** with a heel cushion.

Preventing and relieving plantar fasciitis pain

People are more likely to get plantar fasciitis if they put a lot of wear and tear on their feet. Many things can stress the feet, including obesity, running on hard pavement, bad shoes, a job with a lot of standing, and flat feet.

Doing the things below may help you prevent plantar fasciitis. They may also help you get better faster. Try to:

- Keep a healthy weight.
- Wear healthy supportive shoes.
- Don't overdo it when you're running or playing sports.

Stretching exercises

Your doctor may recommend stretching exercises like this one:

1. Sit in a chair, crossing your sore foot over your other leg. Put your ankle on your thigh.
2. Using the hand on your injured side, pull your toes back toward your shin.
3. To make sure you are stretching correctly, rub your arch with your other thumb. The arch should feel firm.
4. Hold the stretch for a count of 10. Do this 10 times. This is a set.

Do at least 3 sets of stretches per day. Try to stretch before taking your first step in the morning. And stretch after sitting for a long time.



Photo: American Orthopaedic Foot & Ankle Society

- **Custom arch supports.** These can cost as much as \$300 each. But they may be worth it if other treatments don't help.
- **Shock wave therapy.** This treatment uses sound waves. It has proven effective, but your insurance might not pay for it.
- **A cortisone injection** is the last thing to try before surgery. Only try this once. Extra injections don't help, and they have risks.

Surgery for plantar fasciitis has risks.

In this surgery the plantar fascia is cut at the heel. Often, this does not relieve symptoms. Risks include:

- Nerve damage.
- Permanent changes in foot shape.
- Flat feet. (You may need to wear arch supports for the rest of your life.)
- More pain than before the surgery. (You may need more surgery to relieve the pain, and you may have permanent numbness in the heel.)

If you want to be athletic or active, think carefully about whether surgery is right for you.

Surgery and follow-up can cost a lot.

Plantar fasciitis surgery can cost \$10,000 or more, depending on your insurance and where you live. The costs vary a lot based on surgeon's fees, facility costs, and services such as anesthesia and follow-up care.

Before you consider surgery:

- You should try other treatments for at least six months. Your doctor may suggest you wait 12 months.
- Before you consider surgery, see a specialist. For example, an orthopedic surgeon can look for other foot problems that cause your pain.
- Talk to the specialist about the risks and benefits of surgery.

This report is for you to use when talking with your health-care provider. It is not a substitute for medical advice and treatment. Use of this report is at your own risk.

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