



What is it?

At its core, plantar fasciitis (heel pain) is an inflammation of the fascia at your heel—that’s what the -itis part means. There’s lots of academic discussion around the true nature of plantar fasciitis. Some say it’s truly inflammation, while others argue that the tissues are degrading. For most people, plantar fasciitis means pain on the inside bottom part of your heel, especially when you wake up in the morning.

The hallmark of plantar fasciitis is pain on the bottom, inside part of your heel after periods of rest. You might be reading this and think, “But most of my pain is at night. What gives?” Don’t worry. While the majority of typical cases present with morning pain, some atypical cases hurt only later in the day.

What do people experience?

The hallmark symptom of plantar fasciitis is pain on the bottom, inside part of your heel after periods of rest. People describe the pain in a variety of different ways. It could be sharp, it could be dull, it could be achy, it could be burning. It could be all of those things. The quality of pain differs in how people describe it, but the location is usually the same.

Plantar fasciitis is often most painful right after you wake up in the morning and take your first 10 to 20 steps. If you have PF, that’s usually the worst part of your

day. You've been resting for the longest period of the day while you slept. At night while you sleep, your foot relaxes. All the damaged soft tissue starts to half heal in this relaxed and shortened position. Then, when you get up and put weight on your foot, your arch lowers and you increase the stretch on your plantar fascia. That increases the tensile pulling on the attachment point at the heel. With every step, you're re-tearing the half healing from the night before. That's where a lot of the pain comes from, so that's the most important part to pay attention to.

Risk factors

- Longer time spent standing or walking on hard surfaces
- Being overweight
- During pregnancy
- Over- training, or doing too much too soon too fast
- reduction in ankle range of motion
- compensation from another injury

What can you do to feel better today?

- Try range of motion exercises before you get out of bed in the morning
- Replace your old worn down running shoes with proper ones for you
- Consider off-the-shelf orthotics to move more pressure into your arch, and remove it from your heel

What are my options for treatment? Who can help?

Treatment for plantar fasciitis (heel pain) is often stepped in nature. First line therapy often consists of physiotherapy, ice, rest, off the shelf orthotics or gel heel cups, and sometimes medication prescribed by your family doctor. If your symptoms do not settle within 6-8 weeks, consider custom made orthotics to help your on-going heel pain.

Seeing a physiotherapist and massage therapist may also be of benefit.

Prevention/Prehabilitation

Plantar fasciitis is easier to prevent than heal. You can't fix things like high arches, but you can minimize your risk factors by trying to keep your weight down, keep your flexibility and your range of motion up, and mitigating other risk factors such

as hard surfaces for long periods of time and training errors. The other important thing you can do to prevent plantar fasciitis is keep your feet as strong as possible. If the supporting musculature of your foot and ankle is strong, PF is less likely. Once you've had PF, you're more susceptible to getting it again, so it's important to stay aware and keep your feet strong.

Staying active with pain

We have two rules for staying active during injury. Number 1: Don't do anything that makes it worse during or after. Number 2: See rule Number 1.

Don't make it worse. That's not always as simple as it sounds. The problem with plantar fasciitis is that often people will be able to stay active and not have any big pain once they get past their first morning steps. If you're functioning with a low baseline level of pain, you can go running, you can play soccer, you can play tennis. It's only after you sit down from them and then go to get back up again, or when you get up the next morning, that you feel the damage. That's when you're in more pain, not when you were being active the day before. If your plantar fasciitis is bad enough that it's painful while you're doing your activity, you simply have to cut that activity out completely until you recover.

Typically, I tell people that pain shouldn't be increased during or after activity. If you have more pain during, stop. If you have more pain after, then you want to reduce what you did by 15 to 20 percent at first. Try the activity again to see if the pain after is better. If it isn't, keep cutting it back, possibly to the point where you just don't do it for now. You might find that you can still play a round of golf, but maybe it means walking for nine holes and carting for the back nine instead of walking the full 18, or carting for the full course.

DO YOU SUFFER FROM HEEL PAIN WITH YOUR FIRST 10 STEPS IN THE MORNING?

To feel better, read on!

How can SoleScience help you feel better?

Your SoleScience Pedorthist will create an individualized treatment plan that suits your specific needs, goals, and symptoms. We will work with you to determine not only what we need to do to address your current concerns, but also to prevent future problems.

Your pedorthist will complete a thorough and comprehensive foot examination at your initial appointment. A comprehensive follow-up exam will ensure that you are meeting your goals and allow your pedorthist to reassess your treatment plan (as necessary). During these appointments we will:

- Assess joint and muscle function, including range of motion and gait assessment
- Assess your footwear for both fit and function
- Identify any risk factors that can be modified and make recommendations for change
- Identify areas of risk with specialized tools such as pressure mapping (F-Scan or Pedograph)
- Discuss a treatment plan, which may include a change in footwear, activity modification, or custom foot orthoses and/or a complementary treatment referral (such as physiotherapy)

In addition to your individual treatment plan, your SoleScience Pedorthist will provide you with educational resources to help you best maintain your foot health.

Our take on the need for custom foot orthoses

Custom orthotics may be an integral part of helping you heal. Custom orthotics will help reduce gait compensations, reduce strain on your heel, and generally make your day to day more comfortable. In our opinion, though, custom made ones are not always needed as a first line treatment (within the first 1-4 weeks) of plantar fasciitis.

Custom vs. OTS

Off-the-shelf orthotics often help with plantar fasciitis. They're a generic solution that often works for the average person. If you're not average, though, an off-the-shelf orthotic just won't fit your foot properly, or you might need greater correction than an off-the-shelf product can provide. That's where custom-made orthotics come in. These devices are made specifically for your foot using a 3D cast.

A custom-made orthotic can give you all the individual support, stability, and cushioning you need. In some ways, the sky's the limit. We have all kinds of options for materials, shapes, and styles. Because they're fully custom, they can be made to fit any kind of foot. Custom-made orthotics are also fully adjustable if things don't feel quite right.

Footwear recommendations

Choosing appropriate footwear is crucial when recovering from plantar fasciitis. See our footwear section here for more info on picking the right athletic shoe. Wearing shoes that too worn down, may be placing more strain on your plantar fascia. Try wearing your shoes first thing in the morning to reduce your symptoms.