

Get Rid of that Heel Pain

FootFacts

by

Dr. Richard Braver

Heel pain is one of the most common afflictions of runners. However, in the majority of cases this problem can be effectively treated and, even more importantly, can be prevented from occurring in the first place.

Preventively, the athlete should buy running shoes that contain a firm heel counter (preferably with an external stabilizer), a firm but resilient midsole, a flexible forefoot and adequate shock absorption.

The wear pattern of the shoe's sole should be checked each month. Excessive outer wear at the heel or excessive wear at the big toe joint may indicate a mechanical problem. This may be a sign that the foot is undergoing excessive twisting motions that set up for strain. Under this circumstance, the soles of sneakers should be repaired and a full arch support should be placed in the shoe.

Should excessive wear continue, it is advisable to consult with a sports podiatrist or physician.

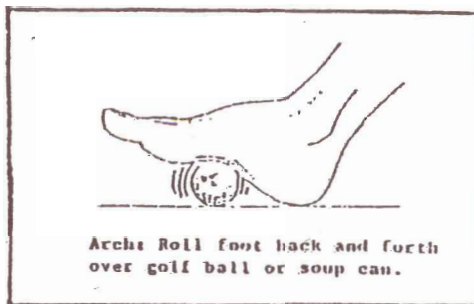
If heel pain is present, one should refrain from running for about five days and perform alternate physical exercises instead. Ice should be applied to the heel at night and after activity for twenty minutes each time. Also, a heating pad should be applied for twenty minutes upon awakening and before the start of any activity.

Rolling the foot over a golf ball from heel to toe improves foot flexibility. Strappings and tapings of the arch and heel as well as the use of heel cups help to reduce excessive motion and twisting of the foot. These also serve to enhance the cushioning effect of the fat pad under the heel and prevents the pad from spreading out when the foot strikes the ground. Should the pain still continue, seek professional help.

Patients often come to the doctor's office stating that they have a "heel spur". However, it is important to realize that it is not usually the spur that causes the pain. It is the pulling away of the plantar fascia from the heel bone to which it is attached.

The plantar fascia is a broad band of ligament that courses the bottom of the foot from heel to toe. It serves to support muscles within the bottom of the foot and provides for mechanical stability. It tends to get irritated from excessive twisting motions. This may cause swelling of the plantar fascia known as plantar fasciitis.

Strain can also result in the bruising of the heel bone and can eventually lead to the formation of excessive bone calcium known as a "heel spur". X-rays can confirm calcium deposit formation or a possible fracture of the bone.



Arch: Roll foot back and forth over golf ball or soup can.

Treatment for heel spurs or plantar fasciitis consist of corticosteroid injections which help to reduce pain and inflammation. This, however, does not correct the cause of the problem. To prevent the problem from recurring it is necessary to eliminate any excessive motions of the foot while running.

Because runners spend a great deal of time on the balls of their feet during push off, a corrective support under this part of the foot is advisable. Therefore, full length custom made prescription orthotics are a necessary adjunct to treatment.

Physical therapy modalities are also important to help speed up the recovery process. Surgery may be performed for long standing heel pain only after conservative measures have proved inadequate. When surgery is performed, the object is to lengthen the plantar fascia, as well as to remove the plantar spur formation. However, surgery is seldom necessary when all the previous preventative and therapeutic measures are undertaken.

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NJ-TAC Sports Injuries Forum

In the up coming issues of the NJ-TAC Newsletter, Dr. Richard Braver will be answering and/or editing sports medicine questions from readers in this column.

Send your questions care of NJ-TAC, P.O. Box 6909, Piscataway, NJ 08855-6909.



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