

Question posed by a Baltimore Sun Reader regarding Plantar Fasciitis.

Dr. Jeffrey T. Brodie was asked to respond:

Question:

"I usually run three or more times a week. Not far--maybe two miles or three or as time allows. I am 74 years old and have been running since I was 45 years old.

This past winter, I developed left heel pain to the point that I couldn't run or even walk comfortably.

The podiatrist gave me a cortisone shot in the heel and told me to not walk on floors barefoot and to stretch my front foot back before getting out of bed. She said I have a heel spur and showed me an X-ray of a bone protrusion where the tendon connects that goes up to the ball of my foot. The expensive fitted and cast shoe insert she gave me was not effective and I found the \$15.00 Rite Aid inserts were much better.

Since then I have been wearing only walking shoes or running shoes with inserts and/or additional inserts. I can wear high heeled western style boots with no difficulty and am pretty much pain free. I cannot wear flat dress shoes without incurring discomfort in my heel. I have not exercised on the track for several months.

I need to exercise and would like to resume running. What would you suggest? Do I need a heel operation? Do you recommend any particular style or brand shoe?

Thanks in advance for your help."

Response from Dr. Brodie:

This sounds like a classic case of plantar fasciitis or inflammation of the ligament that supports the arch of the foot. Studies have demonstrated that the pain that is experienced is not caused by the heel spur. Approximately 95% of patients with heel pain do not end up needing surgery; however, it can take up to 6-9 months to resolve, so patience is important. The initial treatment is aggressive stretching 2-3 times per day. When first getting out of bed, around dinner and bedtime. This should be a standing stretch of the calf with the knee straight and flexed. Appropriate shoe wear is also important with a comfortable arch. Custom orthotics (shoe inserts) are usually not needed. Additional treatment such as nighttime splints to stretch the calf while you sleep and heel cushions can also help. Cortisone injections should be reserved if these other treatments don't help the pain over a 6-12 week period, and should be limited to no more than 2 or 3 injections. Surgery is a last resort for heel pain after non-operative treatment of at least 9 months. I'd recommend you use a sturdy walking or running shoe and once the pain is resolved return to first walking for exercise, then gradually increase the time and speed to begin running.

Jeffrey T. Brodie, M.D.
Chief, Division of Foot and Ankle Surgery
St. Joseph Medical Center