



MARATHON . MARATHON WALK . HALF MARATHON . HALF MARATHON WALK . 5K RACE . KIDS MARATHON

Heel Pain in the Runner: Plantar Fasciitis

Doug Ichikawa, D.P.M.

Teaching Associate, Orthopaedics and Sports Medicine
UWMedicine.org

UNIVERSITY OF WASHINGTON
MEDICAL CENTER
UW Medicine

As the Seattle Marathon approaches, most of you are increasing mileage to new levels and overuse injuries may begin to appear. Chief among overuse injuries of the foot is plantar fasciitis. It is very common amongst long distance runners and heavier people.

The classic symptoms of plantar fasciitis are heel or arch pain, worse with the first few steps after rest or sleep. This pain gets better after a few minutes of stretching or walking. Running on it can even be pain free once it is stretched out, but this does not mean you are not damaging it, it simply means your endorphins are kicking in!

Other conditions that mimic plantar fasciitis are a bursitis of the heel, a nerve impingement in the low back or the heel region, growth plate injury or Achilles tendon pathology.

While the primary treatment for this is **rest**, most of you who are reading this will not be willing to give up your marathon training. Oh well, at least I mention it! Resting does not mean being a couch potato. It can simply mean being a cross-trainer for a while. We love cycling, swimming and elliptical training for our patients with plantar fasciitis. Deep water running is an effective cross-training tool as well. Even a small decrease in weekly mileage can be a significant help.

Beyond rest, there are many modalities that can keep you running with increased comfort. These include shoe gear modification, foot orthoses (orthotics), taping techniques, stretching and icing, anti-inflammatory medication and sometimes cortisone injections.

The recommendation of specific shoes for plantar fasciitis in the long distance runner is beyond the scope of this article. It is important to replace your running shoes often. That's every six to seven months for those putting in 20 miles per week or more. Even if the shoe looks good, the elastic and shock absorbing properties in the shoe diminish over time.

The best foot orthoses are custom molded devices from a reputable podiatrist or sports medicine practitioner. The cost of these can be high and there are several brands of nicer "prefit" or "off-the shelf" devices that can suffice. They are available from most running shoe stores.

[Continued]



There are a few taping techniques that can help support the foot and take strain off the plantar fascia. These are called Low Dye taping or plantar rest strapping. Directions for these techniques can be found on the internet and the tape found through most athletic stores.

Stretching and icing techniques abound. What is most important is to stretch often (several times a day), but to avoid overstretching to the point where you will increase the plantar fascia pain. It is always best to start each stretching session with a warm foot soak and end with a few minutes of ice.

Both anti-inflammatory medications and steroid (cortisone) injections are meant to mask the pain of plantar fasciitis. This is not always ideal, but may be necessary to get you through training and the race. Rarely do we see a long term fix with these modalities and sometimes there are significant reasons not to use these treatments. Instead, they are used to get you through the race to the point where you can truly rest your foot; and hope, in the meantime, that running through the discomfort didn't set you back too much.

Most definitive treatments for plantar fasciitis will include a period of decreased activity and rest. Keeping plantar fasciitis away includes daily stretching, use of good running shoes and foot orthoses, and avoidance of overuse.

