



Musculoskeletal

How to treat plantar heel pain

...a practical guideline for patients and physiotherapists

Author : Henrike Greaves

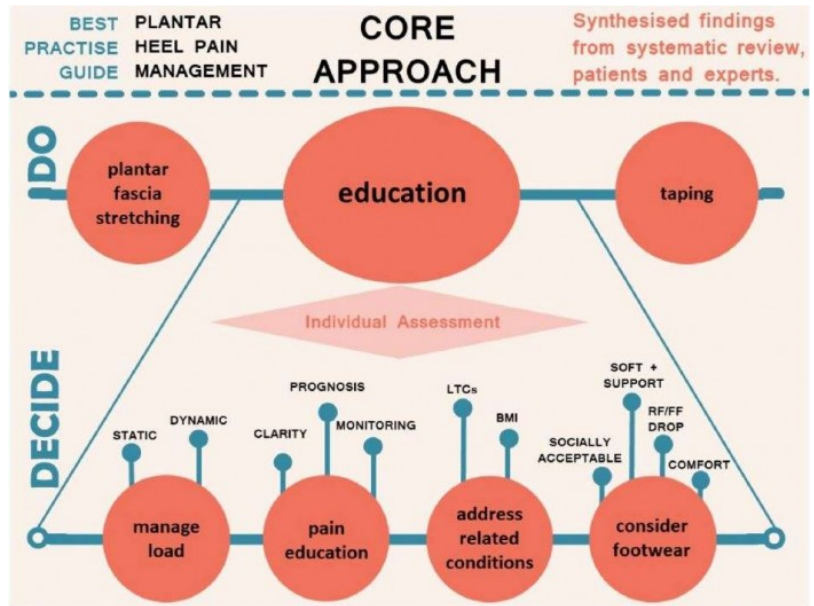
Plantar heel pain (PHP) accounts for around eight percent of running related injuries. It is characterised by pain during weight-bearing tasks, especially after a period of rest.

Published literature is dominated by low-quality trials resulting in clinical practice guidelines that do not recommend any specific treatment for PHP. Therefore, the authors of this study combined findings from randomised controlled trials, experts' opinions and patients' input to develop a best practice guideline.

The authors of his study defined a “core approach” consisting of plantar fascia stretching, low dye taping and individualised patient education, which should be used for 4-6 weeks before considering additional interventions, such as orthoses or shockwave therapy.

The education intervention included four subcategories:

- Load management: breaking up long periods of static loading (standing) and reducing compressive and stretch-related dynamic loading (e.g., during running);
- Pain education: knowledge about pain and relation to tissue state, developing realistic expectations of prognosis;
- Related conditions: address comorbidities, reducing increased body weight;
- Footwear: supportive, comfortable footwear with rearfoot to forefoot drop, avoiding unsupported footwear and barefoot walking.



If patients with PHP do not improve with the core approach, it is recommended to apply additional electrical shock wave therapy (ESWT). If the core approach and ESWT are not successful, it is recommended to use custom orthoses. If this is also unsuccessful, other treatments such as dry needling, corticosteroid and platelet-rich plasma injection therapy, or resistance exercises can be incorporated.

According to the developed best practice guideline, the clinician should take each patient's treatment history and experience into consideration. It is also recommended to develop locally audit, monitoring and checklist tools to support implementation of this best practice guideline.

Finally it should be noted that, though this guideline aims to inform and guide patient care, further work is required to update the treatment approach.

Expert opinion

The authors of this study tried to address the problem of existing guidelines that lack clear recommendations for patients with PHP. The combination of a meta-analysis with expert opinions is a great way for this. On top of this, it is fantastic to see that the authors integrated the patient's perspective, which is unfortunately rarely considered in research.

The authors applied a structured way to analyse and summarise the expert opinion and patients' views. However, both remain subjective and there is a risk of distortion of current evidence. So, this article should be seen as a first step in the development of a practice guideline for PHP. Hopefully future high-quality studies in the field of PHP will enable the development of a high-quality practical recommendation.

> From: Morrissey et al., Br J Sports Med (2021) (Epub ahead of print). All rights reserved to The Author(s). [Click here for the online summary.](#)



Sign up on our website and get access to the latest evidence based articles reviewed and explained by our experts.

Visit www.anatomy-physiotherapy.com

Anatomy & Physiology works with international renown experts and writers to provide a current and evidence-based content service to students, physiotherapist, musculoskeletal health professionals and educational institutes around the world in 5 key thematic areas and 7 different languages.

The best summaries to help you to improve your care. Easy and accessible.



Musculoskeletal



Aging & Chronic
Diseases



Women's Health



Lifestyle &
Prevention



Psychosomatic