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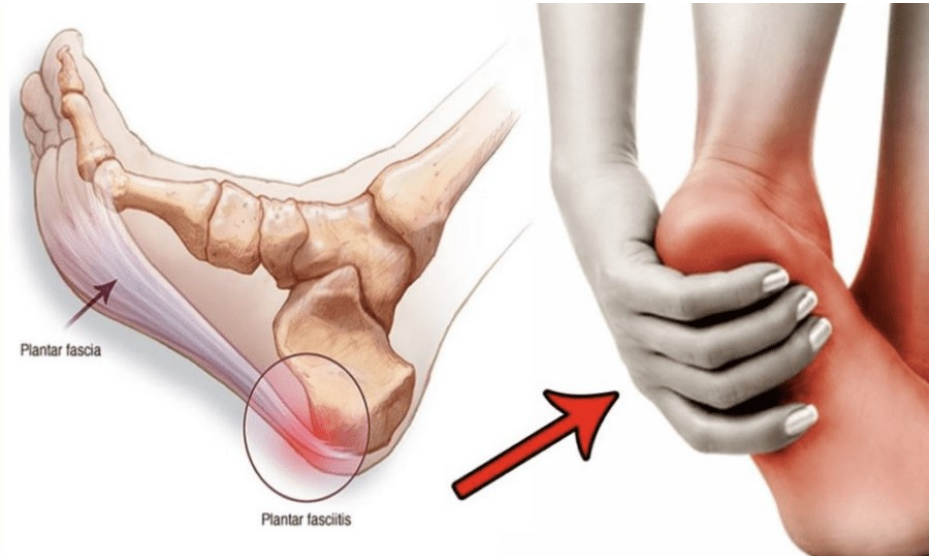
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# Plantar Fasciopathy

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## Further Information

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If they cannot resolve your concern, please contact our Patient Experience Team on 01932 723553 or email [asp-tr.patient.advice@nhs.net](mailto:asp-tr.patient.advice@nhs.net). If you remain concerned, the team can also advise upon how to make a formal complaint.

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## **Introduction**

You have been diagnosed with plantar fasciopathy. This is a very common foot problem and is the most commonly reported cause of heel pain. It is characterized by pain at the heel bone (where the plantar fascia originates from) and results in thickening of the plantar fascia. The condition occurs in both active and less active people. The cause is poorly understood but is thought to occur due to changes in the structure of the plantar fascia. This leaflet explains what plantar fasciopathy is, how it is diagnosed, potential causes and possible treatment options.

## **What is plantar fasciopathy?**

Plantar fasciopathy affects the ligaments that lie underneath the bones in the sole of your feet. The strongest ligament is the plantar fascia or aponeurosis that runs from the heel bone to the ball of the foot. This ligament is divided into three bands; the central and inside(medial) portions are the strongest. Weight bearing causes the foot to flatten, and the ligament stretches. Sometimes this ligament becomes overstretched/overloaded around the heel with time or increased activity. Changes can occur within the plantar fascia resulting in reduced elasticity and pain. The pain is usually over the heel area but can also be around the middle of the foot.

## What are the symptoms of plantar fasciopathy?

- Pain is often worse on first weight bearing in the morning and after rest.
- Pain is often a deep aching pain but can also feel sharp.
- Pain is normally felt either under the heel or on the inside of the heel by the arch area.
- Pain usually improves in time and with gentle activity.

The expectation is that the pain will go within 18 months. In many people it lasts just a few weeks. It is impossible to predict how long the pain will last for each person, but there are things you can do to help with the pain and treat the problem.

## What causes plantar fasciopathy?

Sometimes the symptoms start after an injury and sometimes there seems to be no specific cause. Things that have been linked to plantar fasciopathy are:

- altered foot posture and lower limb alignment.
- trauma.
- being overweight (this increases the load through the feet, especially the heel).
- extended periods of weight-bearing on your feet i.e., walking, running, standing.
- tightness in the calf or Achilles tendon (which affects the ability to flex the ankle upwards).

## Useful Links

### British Orthopaedic Foot and Ankle Society (BOFAS)

<https://www.bofas.org.uk>

Offers a list of all surgeons carrying out specialist foot and ankle surgery across the UK as well as patient information.

### Arthritis Research UK / Versus Arthritis

<https://www.versusarthritis.org/>

Phone: 0300 790 0400

Offers a wide range of information and articles as well as a selection of self-help booklets which can be downloaded on the Internet.

### National Rheumatoid Arthritis Society (NRAS)

<https://www.nras.org.uk>

Phone: 0845 458 3969

Helpline: 0800 298 7650

Email: [enquires@nras.org.uk](mailto:enquires@nras.org.uk)

Provides information and support for people with rheumatoid arthritis (RA) and juvenile idiopathic arthritis (JIA), their families, friends, and carers.

## Are there any other treatments if the above fail?

There is no strong evidence to suggest that there is any single way of treating plantar fasciopathy and expect an excellent outcome. There are some options that seem to have good results, but usually after the calf tightness has been dealt with.

These are:

1. Steroid injections (usually good short-term results. Risk of fat necrosis and rupture of plantar fascia).
2. Autologous blood injection (PRP injection).
3. Shockwave therapy (painful, but with good results).
4. Dry needling to plantar fascia.
5. Topaz procedure. The procedure involves using a special needle-like wand to create a series of holes into the damaged plantar fascia. Once the probe is inserted it emits a small burst of radiofrequency energy that creates tiny holes into the fascia, breaking up scar tissue.
6. Surgical release with plantar fasciotomy. (Complications are common and recovery can be very long).

Discuss with your surgeon what is the best treatment for you, based on their clinical examination and experience.

- footwear that provides the foot with poor cushioning/support through the arch of the foot.
- recently starting to exercise on a different surface.
- overuse or stretching of your sole i.e., athletes who increase running intensity or distances.

## Some initial strategies to help treat plantar fasciopathy

### Lifestyle Modification:

- Keep barefoot walking to a minimum.
- Wear footwear with good, thick, but flexible soles (wear them around the house). Footwear should be supportive, but should not compress your feet too much, fit well and have cushioned soles, especially in the heel area.
- Reduce long periods of standing.
- Omit high impact exercise i.e., running, jumping, aerobics. Continue to do activities of daily living, but try and do these activities in a paced way (i.e., regular amounts of activity each day, but in smaller, more manageable chunks.)
- Try to align knees over your feet when going from sitting to standing to sitting and on stairs also.
- Insoles.

### Plantar fascia cold therapy:

- Fill a plastic bottle with cold tap water. Keep this in the fridge so it can be used regularly.

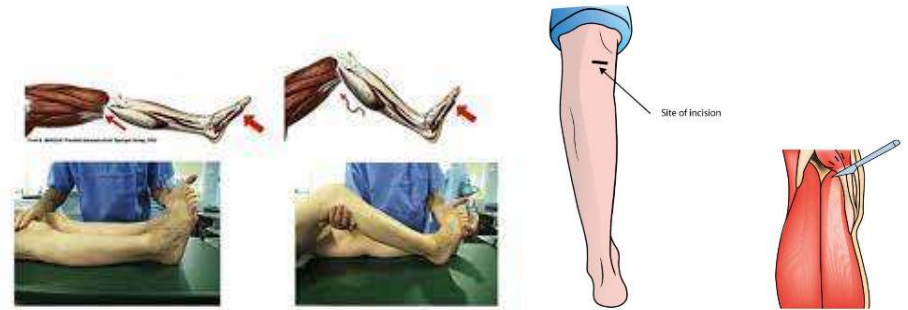
- Place the cold bottle on the floor and use the sole of the foot to roll the cold bottle back and forth along the sole of the foot. Do this for 15 mins 2 or 3 times per day.

## Calf stretches

There is more and more evidence in recent years to suggest that tight calves are strongly related with problems of the feet. Therefore, it is believed that calf stretches can help with plantar fasciopathy. The easiest and best way to stretch your calf muscles properly is by using a slant board at home every day.



Stand on the slant board for 3 minutes x 3 times a day initially and gradually progress to a minimum of 5 minutes x 5 times a day for -at least- 3 months. You should always wear your trainers (with appropriate insoles) when you do this exercise. If stretching your calves regularly at home, fails to improve your calf tightness (your surgeon will assess you for this), you might be advised to have a small surgery to release your calf muscles.



## Gastrocnemius muscle tightness and release

This operation is being done usually under local anaesthetic and sedation, lasts about 10-15 minutes and you go back home within a few hours from surgery, fully weight bearing in a boot for up to 2 weeks. You may require regular pain killers for a few days, as the operated muscle will feel like "bruised". As soon as you feel comfortable again, you should restart regular stretches of your calves.