Heel Pain

Hands-on Physical Therapy and Stretching Prove Effective for Treating Heel Pain

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o YOU EVER WAKE UP WITH PAIN IN THE HEEL OF YOUR foot first thing in the morning? If so, you may have plantar fasciitis, the most common type of heel pain. People with heel pain typically report a sharp pain under their heel that may spread into the arch of the foot. The pain is often worse when the person stands after lying down or following a period of sitting—for example, taking the first couple of steps in the morning or standing up after watching TV. Although the pain may actually



CALF STRETCHES. While standing with your foot straight ahead, lean forward and keep your heel on the floor until you feel a stretch sensation in your calf. Perform this stretch first with the back leg straight and then repeat it with the back knee bent.



FOOT STRETCH. While seated, grab the base of your toes and pull them toward your shin.



HANDS-ON THERAPY. An example of a trigger point pressure release technique that can be performed on your calf muscles by your physical therapist.



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decrease with activity, such as walking, it tends to return at the end of the day. Plantar fasciitis is not typically the result of an injury. Instead, this condition usually develops gradually and, if untreated, may get worse over time. By current estimates, 2 million Americans develop heel pain each year, and about 10% of all people will have heel pain at some point in their lives. The February 2011 issue of *JOSPT* published a research study that provides new evidence that can help people who suffer from heel pain.

NEW INSIGHTS

In this study, 60 patients with heel pain were randomly placed into 1 of 2 treatment groups. One group of patients performed calf and foot stretches and had hands-on therapy provided by a physical therapist (see drawings at left), while the other group only performed the stretches. The treatment performed by the physical therapist focused on treating sore points, sometimes called "trigger points." Trigger points are small sections of muscles that feel "knotty" and, when pressed, become more painful. The researchers found greater improvements in patients who both performed the stretches and received hands-on therapy. This finding is important because it suggests that people who are not getting better on their own may benefit from hands-on treatment.

PRACTICAL ADVICE

Although stretching the calf and foot can reduce heel pain, the addition of hands-on physical therapy resulted in better pain relief and greater improvements in function during the first month of treatment. The 3 stretches in this study were performed using a 20-second hold, 20-second recovery time and were repeated 3 times, twice a day. If you have heel pain, you may wish to seek the help of a physical therapist who can instruct you on the proper stretching techniques to perform. The physical therapist can also determine if you are a candidate for trigger point soft tissue techniques applied to your calf muscles, as were used in this study. For more information on the management of heel pain, contact your physical therapist specializing in musculoskeletal disorders.

For this and more topics, visit JOSPT Perspectives for Patients online at www.jospt.org.

This JOSPT Perspectives for Patients is based on an article by Renan-Ordine R, et al, titled "Effectiveness of Myofascial Trigger Point Manual Therapy Combined With a Self-Stretching Protocol for the Management of Plantar Heel Pain: A Randomized Controlled Trial." (J Orthop Sports Phys Ther 2011;41(2):43-50. doi:10.2519/jospt.2011.3504)

This Perspectives was written by a team of *JOSPT*'s Editorial board and staff, with **Deydre S. Teyhen**, PT, PhD, Editor, and **Jeanne Robertson**, Illustrator.

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