Heel and Arch Pain Has Many Causes

PLANTAR FASCIIITS
The most common cause of heel and arch pain is a condition called plantar fasciitis. This is an inflammation of a thick band of tissue that runs along the arch of your feet from your heel to your toes, and aids in stabilization of your arch during walking and running. Symptoms involve two areas -- the arch, and more commonly, the bottom inside heel area. Severe pain can be present, especially in the morning on arising. Common symptoms of plantar fasciitis include:
- Pain in the morning when you first get out of bed
- Pain and stiffness when you start to walk after sitting for a while
- Increasing pain in your heel or arch towards the end of the day
- Tired feet at the end of the day

Other causes of heel and arch pain include arthritis, infection, fractures and sprains, or even certain systemic diseases. Because of the multiple possible causes you should see your podiatrist for a thorough evaluation if you are experiencing heel or arch pain.

WHAT CAUSES PLANTAR FASCIIITS?
Heel and arch pain is usually the result of faulty biomechanics (walking gait abnormalities) that place too much stress on the heel bone and the soft tissues that attach to it. This increased stress causes local inflammation and pain.

The most common cause of this increased stress is a condition known as "over-pronation", which means that your feet roll inward too much when you walk. As they roll inward the arch of the foot flattens and the arch lengthens. When the arch lengthens there is increased tension on the plantar fascia.

HOW IS PLANTAR FASCIIITS TREATED?
At the Foot & Ankle Center of Washington we are specialists in the treatment of plantar fasciitis and other causes of arch and heel pain. It is the most common complaint of clinic patients and we find that well over 99% of the time it responds well to our specialized treatment program. Surgery is almost never required.

Our treatment program focuses on two main areas:
1. We want to relieve your pain and get you back participating fully in the activities you enjoy. To this end, we try to relieve the inflammation which is causing your pain. This may involve exercises, physical therapy, anti-inflammatory medications, heel cups, arch supports, prescription orthotics, or a combination of therapies.
2. More importantly, we will find the underlying cause and devise a personalized treatment plan to not only relieve your pain in the short run, but also prevent it from reoccurring. We will evaluate your feet, walking pattern (gait), shoes, activities, exercise methods, and other relevant information and then devise your treatment plan.

CUSTOM ORTHOTICS: The Best Weapon in Fighting Difficult Cases of Plantar Fasciitis
In more difficult cases of plantar fasciitis you may have a custom functional orthotic prescribed for you. Research indicates in cases of mechanically induced heel and arch pain which does not initially respond to treatment, the most effective treatment is quality prescription orthotics.

Custom foot orthotics are precision balanced medical devices worn in your shoes to allow the feet and lower extremities to function properly and help eliminate pain and deformity caused by improper function. They are specifically designed to fit your feet and act to restore the normal biomechanical function of the lower extremities. Custom functional orthotic devices have the greatest chance of reducing the tension in your plantar fascia, reducing your pain, and helping you avoid surgery.

Orthotics for plantar fasciitis are prescribed specifically to help take tension off of the plantar fascia. In order to ensure best outcomes we first perform a detailed examination, including 4 camera slow motion video analysis, of how you walk and how your big toe joint works. A mold of your foot is then taken in a very specific position and the orthotic devices are prescribed in a manner to ensure best function of your feet.

Dr. Larry Huppin and Dr. Doug Hale are specialists in orthotic therapy and, in fact, teach orthotic therapy to other doctors at seminars throughout North America. We take great pride in providing our patients with the best possible orthoses for their particular problem. The quality of orthotic devices varies considerably and depends on many factors. We guarantee our patients that their orthoses are the finest quality and biomechanically accurate.

It's not normal for your feet to hurt. If you are experiencing painful, achy, or tired feet call today for an evaluation.
Is Surgery Ever Necessary?
There are rare cases of plantar fasciitis which do not respond to conservative treatment. If surgery should be necessary, we will provide you with comprehensive, state-of-the-art care. You should, however, always give conservative treatment at least 6 months to work.

Conservative treatment usually includes several of the following: physical therapy, anti-inflammatory medications, exercises, shoe recommendations, prefabricated arch supports and if necessary; quality prescription orthotics.

In resistant cases or in the case of more severe biomechanical problems the following may be used:
- Custom orthotics
- Local steroid injections
- Physical therapy
- Night splints
- Immobilization
- Extracorporeal Shock Wave Therapy (high energy ultrasound therapy)
- Surgery

Treatment Protocol
Initial Treatment usually consists of:
- Supportive / stable shoes
- Stretching exercises
- OTC arch supports or taping
- Icing
- Massage
- Oral anti-inflammatory medications

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Causes and Treatment of ARCH AND HEEL PAIN

Dr. Douglas S. Hale
Douglas S. Hale, DPM graduated with honors from both Tulane University School of Engineering and the Dr. William Scholl M. College of Podiatric Medicine. Upon completion of his Podiatric Medical degree, he pursued a residency in reconstructive foot and ankle surgery.

Dr. Hale’s residency program, currently based at Swedish Medical Center-Providence campus, was and still is rated among the top five in the United States and only accepts two residents yearly. The residency program provides extensive clinical and hospital experience in both common and complex conditions of the foot and ankle and many other areas including podiatric family and sports medicine, as well as reconstructive foot and ankle surgery. In addition he has specialized training in orthotic therapy. He is successful in treating most foot and ankle conditions with conservative therapy, but when necessary has the expertise to make surgical corrections.

Dr. Hale, who is triple-board certified, has been in private practice in Seattle for over 10 years, treating simple to complex foot and ankle disorders. In 2003, he was elected by his colleagues as Chief of Podiatric Staff, Swedish Medical Center, Seattle, WA and remains actively involved in the residency program as Extern Director. He lectures to physicians and students regionally on a variety of topics and has received numerous awards.

Dr. Lawrence Z. Huppin
Lawrence Z. Huppin, DPM earned his medical degree at the California College of Podiatric Medicine. Following graduation he completed a podiatric medical residency.

In 1989 he was one of only two podiatrists nationally to be accepted into the California College of Podiatric Medicine Fellowship in Podiatric Biomechanics. This one-year program, the only of its kind in the United States, consisted of extensive training in foot and body mechanics, focusing on the areas of orthotic therapy, sports medicine, and children’s foot conditions.

In 1993, Dr. Huppin became board certified by the American Board of Podiatric Orthopedics. In 2000 he was the Washington State Podiatric Physician of the Year. In 2002 he was named as an associate professor in the department of biomechanics at the California College of Podiatric Medicine.

Dr. Huppin is a nationally recognized lecturer and teacher on orthotic therapy and biomechanics. Along with his private practice, he is the director of the Institute for Orthotic Therapy Education – a Bay Area based organization that provides education on orthotic therapy to doctors and medical students throughout the United States and Canada. In this capacity, he provides education, consultation and instruction to other doctors on the best techniques of conservative foot and ankle therapy.