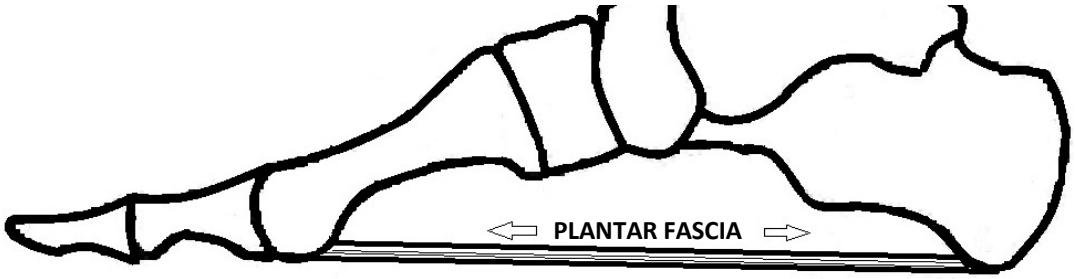
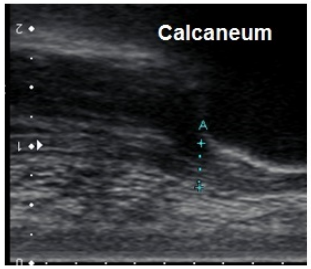
SUMMER EDITION | FEBRUARY 2019
ANKLE, FOOT & ORTHOTIC CENTRE - NEWSLETTER

HEEL PAIN

Heel pain (plantar fasciitis, plantar fasciiosis, heel spurs) is very common and typically causes pain with first step and with extended walking.
The **Flow chart** below provides an overview of the degenerative process and some of the treatment options available at the Ankle, Foot and Orthotic Centre





Ultrasound appearance of a Normal Plantar Fascia
Normal linear fibrillar pattern normally 3-4mm thick

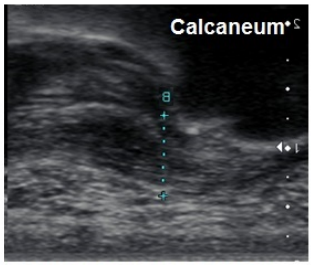
Trauma/ Overload of the plantar fascia
Micro tears and damage

NO HEEL PAIN
Normal Plantar Fascia

Weeks or Months

HEEL PAIN
Thickened and Chronic Degeneration of the plantar fascia

ACUTE AND ACTIVE



Ultrasound appearance of Plantar Fascia Degeneration
Loss of the normal linear fibrillar pattern of the plantar fascia with thickening (5-8mm thick) and insertional bone interface changes

PHASE 2 OF TREATMENT- REPAIR PHASE
MINIMISE THE CAUSATIVE FACTORS THAT RESULTED IN THE DEGENERATION IN THE FIRST PLACE AND PERFORM TECHNIQUES TO ENSURE APPROPRATE HEALING

OPTIONS INCLUDE:
- **More Supportive shoes**
- **Alfredson Eccentric Stretches (Calf Stretches)**
- **Night Splint (Strassburg Sock)**
- **Orthotic Insole arch supports**
- **Shoes with a slight heel**
- **Gel Heels**
- **Taping Techniques**
- **Manual Massage (Frozen bottle)**

PHASE 1 OF TREATMENT- STIMULATION PHASE (FOR A CHRONIC DEGENERATIVE PLANTAR FASCIA)
THE AIM IN THIS PHASE IS TO MAKE THE AREA OF CHRONIC DEGENERATION **ACUTE AND ACTIVE** SO THAT THE BODY CAN START TO REPAIR THE DAMAGED AREA
OPTIONS INCLUDE:
- **Shockwave Therapy**
- **Injection Therapy** - Dry needling (fenestration), cortisone, prolotherapy
- **Manual Massage**
- **Alfredson Eccentric Stretches (Calf Stretches)**

Ankle, Foot & Orthotic Centre

- **Painful heels**
- **Mortons Neuroma**
- **Diagnostic Ultrasound Imaging**
- **Ultrasound Guided Injections**
- **Bunions**
- **Ingrown toe Nails**
- **Corns/ Callous**
- **Sports Podiatry**
- **Kids Feet**
- **Orthoitcs**
- **Achilles Injuries**
- **Flexible Flat Feet**
- **Clawed Toes**
- **Shockwave Therapy**
- **Ankle Foot Orthotics (AFO's)**

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The use of shockwave therapy has gained attention recently for its use in chronic tendinopathy in the foot, ankle, elbow, shoulder and knee. For the Foot and Ankle we have found Shockwave Therapy particularly beneficial in treating **Achilles** Pathology and **Plantar Heel pain**

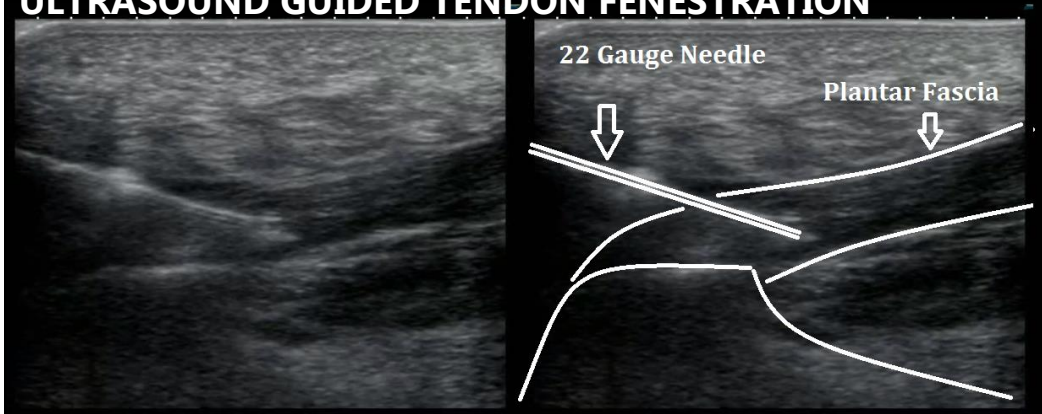
Non-invasive Extracorporeal Shockwave Therapy (ESWT) delivers abrupt, high amplitude pulses of mechanical energy.

This type of procedure has been reported to have a 60- 80% success rate (1).

At the Ankle and Foot Centre we use the Swiss Dolorclast Machine, this machine is FDA approved and has been involved throughout the literature and is considered one of the best shockwave therapy units.

1. Notarnicola A, Moretti B. The biological effects of extracorporeal shock wave therapy ESWT) on tendon tissue. Muscles Ligaments Tendons J. 2012;2(1):33-7.

ULTRASOUND GUIDED TENDON FENESTRATION



Tendon Fenestration involves passing a needle through the abnormal tendon multiple times (20-25 times) to change a chronic degenerative process into an acute condition that is more likely to heal.

At the Ankle, Foot and Orthotic Centre we find this procedure is beneficial for non-responsive **Achilles Tendinopathy** and **Plantar fasciitis.**

It is very important that the region is numb for this procedure with the use of local anaesthesia. Ultrasound guidance ensures that the needle is passing through the areas of tendon degeneration.

Tendon Fenestration is thought to stimulate tendon healing by disrupting the areas of tendinosis (2)

2. Chiavaras, M.M. and J.A. Jacobson, *Ultrasound-guided tendon fenestration.* Seminars in Musculoskeletal Radiology, 2013. **17**(1): p. 85-90.

Ankle, Foot & Orthotic Centre

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