



Plantar Fasciitis: Causes, Symptoms, Treatment, and Prevention

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Abstract

KW : Plantar fasciitis; Inflammation; Achilles tendon

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Plantar fasciitis is a common and often debilitating foot condition that affects millions of individuals worldwide. It is characterized by inflammation and pain in the plantar fascia, a thick band of tissue that runs along the bottom of the foot, connecting the heel bone to the toes [1]. This article provides an in-depth overview of plantar fasciitis, including its causes, symptoms, treatment options, and preventive measures. Understanding this condition is crucial for individuals who experience pain typically located on the underside of the foot near the heel bone.

The pain is often most pronounced in the morning or after periods of rest, and it may gradually subside with movement but can return after prolonged activity. Individuals with plantar fasciitis may also experience stiffness, tenderness, and swelling in the affected area.

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The management of plantar fasciitis usually involves a combination of conservative measures. These include:

Rest and avoiding activities that exacerbate the pain.

Applying ice to the affected area to reduce inflammation and pain.

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Overuse or repetitive strain on the plantar fascia due to activities like running, jumping, or standing for long periods.

Foot mechanics issues, such as flat feet or high arches, leading to abnormal foot alignment and increased stress on the plantar fascia.

Inadequate footwear with insufficient arch support or cushioning.

Tight calf muscles and Achilles tendon, causing increased tension on the plantar fascia.

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Intense pain in the heel, typically on the underside near the heel bone.

Pain is often worse in the morning or after rest, gradually improving with movement but returning after prolonged activity.

Stiffness, tenderness, and swelling in the affected area.

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Rest and activity modification to reduce strain on the plantar fascia.

Application of ice to reduce inflammation and pain.

Stretching exercises targeting the calf muscles and plantar fascia to improve flexibility and reduce tension.

Orthotic devices, such as arch supports or heel cups, to provide cushioning and support.

Use of nonsteroidal anti-inflammatory drugs (NSAIDs) for pain and inflammation relief.

Physical therapy to strengthen foot and leg muscles and improve flexibility.

Extracorporeal shockwave therapy (ESWT) or corticosteroid injection.

desired activities with comfort and ease.

References

patients

atherosclerosis in type 2 diabetes patients

the foot in diabetes