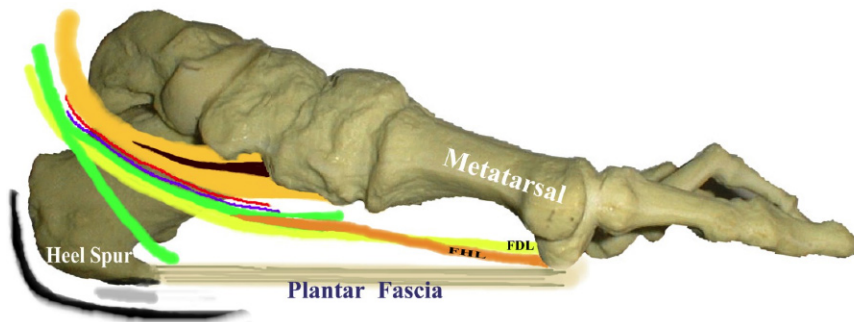


## Birmingham Foot Clinic Advice Guide Plantar Fasciitis Surgery



### Heel spur

This is a ridge of bone at the insertion site of the plantar fascia where it attaches to the heel bone. Heel spurs are often present in heels which have never been painful and it is no longer thought that they play any part in heel pain or plantar fasciitis.

### Plantar Fasciitis

Plantar fasciitis (inflammation of the plantar fascia), is a common cause of heel pain in active people such as athletes and those with heavy walking or standing jobs especially on a hard surface. Factors such as step-aerobics, putting on weight or suddenly increasing activity can be involved.

The plantar fascia is a thick strong ligament-like band extending from the heel bone to the base of the toes. It acts like a thick springy band supporting the arch a bit like the string of a longbow.

If overstrained, the plantar fascia can be damaged anywhere, but the most common area is at the insertion into the heel bone. Resting the heel is difficult, damage is therefore slow to heal, and can become severely painful taking several months to resolve.

Most often the problem resolves with non-surgical treatment and advice. Approximately 75% of people with this problem find their symptoms resolve within 6 months of treatment and about 98% of people are symptom free within 12 months. Only about 2% of patients need to have heel surgery to help resolve their symptoms. Effective management of your problem will follow a system we have found works well.

1. We will try to find the cause of the fasciitis and minimise this. We will advise you on suitable footwear and also regarding activities which may worsen the problem. You will be set calf stretching exercises and instructed on how to help decrease any inflammation (ice packs and/or a short course of anti-inflammatory medication).
2. If your symptoms have not begun to settle by your second appointment, we may recommend the use of in-shoe orthoses (supports), a shock absorbing heel cup, the use of a night splint and/or a referral to the physiotherapy department.
3. If your symptoms still remain to a sufficient degree by your third appointment, we may recommend the use of a series of corticosteroid injection into the painful area to maximise the reduction of inflammation, in combination with the previous therapies.
4. If the heel pain is unresponsive despite many months of non-surgical intervention, we may recommend a surgical release of the plantar fascia where it inserts into the heel bone. This is only appropriate for those who have severe symptoms which have been unresponsive for several months and are unable to perform their job or whose lifestyle is severely impaired. This surgery is rare, as most people do have significant relief from non-surgical treatment, but where surgery is necessary its success rate is high (90%).

### Problems / Risks Associated with Soft Tissue Surgery

- Thickened scar and/ or tender scar - may reduce over 12 months
- Areas of numbness - may reduce over 12 months
- Infection (sudden increase in pain and swelling at 2 to 3 days after surgery - or later)
- Recurrence

### On the day of surgery

On the day of surgery you may eat and drink as normal unless you are being sedated or having a general anaesthetic (follow anaesthetic advice sheet). It is essential that you are accompanied and have made arrangements for transport home, this should not be public transport. Following the surgery, for a typical period of 2 - 4 weeks, you will not be able to drive, as your insurance will be invalid.

This type of foot surgery is usually carried out under a local anaesthetic. With a local anaesthetic you will not be asleep, however you will feel no pain during the operation due to the pain blocking properties of the local anaesthetic given.

Discomfort will only be experienced when the local anaesthetic injections are given, which feel the same as most other injections you may have received in the past. A good comparison is a dental anaesthetic for a filling.

Operation usually lasts about 20 - 45 minutes in total. You can bring a book or a music cassette or CD if you wish, to help you relax and feel comfortable during the procedure.

## Problems

Following the advice given to you will greatly reduce the risk of a problem. If you are however concerned about anything before or after your surgery you can speak to a member of the team directly on Tel:07970 740 522. If your call is an emergency and you are unable to get through, you may also contact your GP who will be aware of the surgery you will have had.

## Self care

After the operation you should sit with your leg raised and knee slightly bent for at least 8 hours. After this period you should walk on your operated foot, bearing some weight. Some discomfort may be experienced. For the first 3 days you will need to take pain relieving tablets (analgesics) as prescribed or advised. It also helps during the first 8 hours to place a bag of frozen peas, rapped in a towel across you ankle for 3 - 5 minutes per hour. Walking in the first 48 hours should be limited to indoors only.

Stitches are usually removed at 2 to 3 weeks after the operation. From this point you may be able to wear normal footwear, however it is strongly advised that you wear a training shoe or similar for 2 months after the operation to help in the healing process.

You may experience swelling and unusually sensations in the foot for some period (up to 6 months) following the surgery, however this will gradually subside.

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