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Treatment options influencing physical therapy and early ambulation in " Plantar fasciitis/painful calcaneal spur

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Abstract

Plantar fasciitis is characterized by pain and stiffness involving the heel and plantar surface of the foot with maximum tenderness at the insertion of plantar fascia on the calcaneal tuberosity, often associated with exuberant calcaneal osteosis (spur).

Steroid injections have been used to treat heel pain since the 1950s and are one of the most frequently described treatments for painful heel in medical literature. Injection of the plantar fascia is best accomplished through medial or lateral approach or through the pedal pad of fat. If corticosteroid flows back along the needle track, rupture of the plantar fascia or atrophy of the plantar skin and calcaneal fat pad may occur, resulting in bone on –skin in the critical weight bearing pressure point of the heel. Another drawback is the extreme pain experienced by patients during infiltration of the tissues surrounding the calcaneum and many end up with withdrawing the heel during the process of injection, leading to accidental corticosteroid flow back, resulting in unsatisfactory therapeutic response or enhanced complication rate.

We have employed posterior tibial nerve block to relieve the pain during corticosteroid injection which enhanced patient comfort, increased compliance with the follow up treatment, reduced complications and enthusiastic participation with physical therapy.

Failed injection therapy, need for repeated injections, recurrence rate and the necessity for surgical intervention were also less frequent in our experience.

Biography

Ramasamy Govindarajan completed his medical education from Madras University, India. He practiced as a consultant Anesthesiologist and Pain Management Physician @ Coimbatore, India for over 15 years before migrating to USA in 1993. He obtained board certification in Anesthesia and was a faculty and Director of clinical research, in the residency program @ Brookdale university hospital, Brooklyn, NY, until May 2012. Since then he is employed as an attending Anesthesiologist @ Bronx Lebanon Hospital, Bronx, NY. He has many publications in major journals and presentations in national and international conferences in Anesthesia, Critical Care and Surgery.

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