The best form of treatment. Don’t hesitate to contact her Xrays patient’s feet to determine

ommended.

fasciitis resistant to treatment, a

accomplish this. For individuals

take your shoe and grab

mation, at the heel. A steroid

into the area of the most inflam-

nentation, at the heel. The body responds

by increasing it’s healing ability

at that area, stimulating a repair

process.

For over twenty years, extracorporeal

shockwave therapy (ESWT), a non-invasive

procedure, has been successfully

used in the treatment of kidney

stones. The shockwave stimulates

and reactivates healing through

revascularization and other

elements necessary to advance

normal tissue healing.

Know When To See A Doctor

Taping

Because taping is difficult to do

on your own foot, this therapy is

commonly done by a podiatrist or

physical therapist.

Custom made orthotics

Custom made orthotics are
devices which are molded specifically
to your feet. A plaster mold is

taken while you are sitting or lying

on your stomach. Another method

for casting is placing the foot in a

foam box and taking a mold. The

most common type of foot needing

an orthotic is a flatfoot. But,

any foot with abnormal motion

may benefit from a custom made

orthotic. To know if you need an

orthotic, you should visit a podia-

trist and be evaluated. Custom

made orthotics are rigid devices,

with a soft cover. The rigidity is

necessary to hold the weight of

the body and control the abnormal

motion. A soft orthotic will col-

lapse under the weight of the

body and be no better than a cushion.

Physical therapy

Physical therapists play an inte-

gral part in the treatment of plan-

tar fasciitis. Most therapists are

well trained in treatment of this

condition because it is so com-

mon. Physical therapy may involve

ice baths, contrast soaks, stretching,

strengthening, ultrasound and

iontophoresis. Some therapy can

be done at home, other therapy

may involve twice weekly visits

to the therapist for a number of

months for good results.

Shockwave therapy

The term shockwave therapy

usually makes people jump. No,

this is not electric shock therapy.

It is extracorporeal shockwave

therapy (ESWT). Shockwaves are

sound waves that create vibrations.

The theory is that the vibrations

cause controlled injury to the

tissue, in this case the plantar

fascia and surrounding structures

at the heel. The body responds

by increasing it’s healing ability

at that area, stimulating a repair

process.

When Is It Time To See A Doctor?

If your pain hasn’t resolved

within a few weeks, it is recom-

mended to make an appointment

with a podiatrist. Other possible

causes of heel pain will be ruled

out, an X-ray may be taken and

a review of the treatments listed

above will be given. Conservative

therapy is always tried initially.

Steroid Injections

These are not the type of ste-

roids which build up muscle,

but the type which decrease inflam-

mation. The steroid is injected right

into the area of the most inflam-

mation, at the heel. A steroid

injection does not heal the fascia,

it decreases the inflammation. It

is important to remember this.

Steroid injections work the best

when they are used in conjunction

with all the conservative therapy

mentioned above.

Does the injection hurt?

The short answer is yes, it does.

But, the good news is that the

injections are quick and the pain

you feel when you get out of bed

in the morning is far worse.

GENTLE PODIATRIC CARE

Egg Harbor Townships ONLY Podiatrist!

FOOT & ANKLE CENTER, LLC.

(609) 272-1450

Studies have shown a 92% success rate with just one

18 minute treatment. This procedure is FDA approved,

requires no surgery, and is safe and effective. ESWT can also

be used in cases where heel surgery was performed and

failed. Also, there is no time lost from work.

EPF: Endoscopic Plantar Fasciotomy

EPF is a minimally invasive surgical treatment for chronic

plantar fasciitis. The procedure involves making a small incision

on the inside and outside of the heel. A small camera is inserted

into the heel which allows the surgeon to visualize the plantar fascia.

The success rate of this procedure ranges from 80-90% good to

excellent results and the complications are reduced in comparison to

an open heel surgery.

If you are suffering from heel pain, a thorough evaluation by a podiatrist is a must. Acute and

chronic heel pain can have many causes and may not necessarily be plantar fasciitis. By identifying the

cause of your pain and making a correct diagnosis, it can be treated appropriately. I see heel pain

every day and know how debilitating it can be. Through thorough and compassionate care, most of these patients are

back to a pain-free life.

Irina A. Tsyganova, DPM is a graduate of the Temple University of Podiatric Medicine. She completed residency

training in Podiatric Medicine and Surgery at Kennedy Memorial Hospital - University Medical Center. She is trained in all aspects of foot

and ankle medicine and surgery. She is also an actively involved Associate Member of the American Society of Podiatric Dermatology, American Professional

Wound Care Association, American Academy of Podiatric Practice Management, and American Podiatric Medical Association

6 Lose weight.

“AAAAHHHHH. Don’t say that! How am I suppose to lose weight when I can’t walk?” Yes, you are right, and as the saying goes, you are caught between a rock and a hard place. It is very difficult to lose weight when you are told to decrease your activity and you are in pain. In fact, most people gain weight when they develop plantar fasciitis. Unfortunately, the increased weight gain puts even more stress through the arch and the heel, making the problem worse. This is why it is so important to take the necessary steps to lose some weight. Even losing five or ten pounds will make a difference.

7 Wear supportive shoes.

This may sound obvious, but many people wear thin, flimsy shoes and wonder why they have heel pain. Your shoes should have a supportive sole which is rigid from the heel to the ball of the foot. The shoe should only bend at the toes, not in the middle. To test this, take your shoe and grab the heel. Place the toe box on the floor and press down. If the shoe collapses, it is much too flexible and should be thrown away.