

FootCare Update



Expert care from professionals who care.

Volume III, No.5; Revised Winter, 2006

Endoscopic surgery offers the first real hope of pain relief to the one in four heel bursitis sufferers who need surgical correction.

Heel bursitis, sometimes called heel spur syndrome or plantar fasciitis is a common type of heel pain that is caused by too much stress on the Plantar Fascia, a ligament that stretches from heel to toes lengthwise along the bottom of your foot. Too much pulling or strain on the ligament causes a chain reaction:

- 1) The ligament begins to pull away from the heel bone,
- 2) The pulling irritates and inflames the surrounding tissue and often causes a bone spur to form.
- 3) Then you feel pain.

The warning signs

Often described as a feeling like you have a stone in your shoe, the pain resulting from heel bursitis is usually worse during your first steps in the morning or when you stand up after a period of sitting for a time. As the condition progresses, your heel may hurt while not weight-bearing.

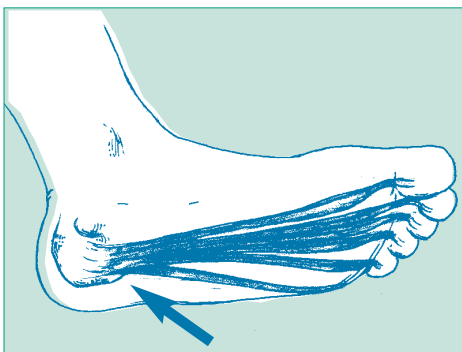
Typically, inherited genes determine foot structures that predispose some individuals to heel bursitis, explained Dr. Kenneth Leavitt. Then one or more reasons can bring on heel pain including, ten to fifteen pounds weight gain, (which can occur in late months of pregnancy) sudden increase in walking, running, aerobics, and occupations that involve long hours of standing on concrete floors or

tile. It is important to note that the bony spur is not the real cause of the pain.

Won't go away by itself?

Heel bursitis will not go away by itself, Dr. Leavitt said. In fact, if medical attention is delayed, the condition may worsen, making treatment more difficult.

The first treatment for this type of heel pain combines medication to reduce the inflammation, use of appropriate shoes and possibly the use of custom-molded



Too much tension at this point can cause the plantar fascia to pull away from the heel bone.

arch supports (orthotics) to align the foot and reduce the strain. These non-surgical treatments can successfully relieve heel pain in about four out of five cases. Ultimately, when conservative treatments fail, surgery is the next step.

Only a Tiny Incision

Heel bursitis surgery used to require a large incision and patients were unable to

bear weight on their heel for up to four weeks. Today, thanks to new technology, a new technique -- called Endoscopic Plantar Fasciotomy -- uses two tiny punctures on each side of the heel. The surgery partially cuts through the ligaments in front of the heel bone, allowing them to stretch more as the foot flexes. Using a tiny video camera in one hand and a small probe in the other, the surgeon will see his work on the video screen.

The surgery doesn't actually remove the spur, which is a result of chronic inflammation, usually not the origin of the problem. Since most spurs do not actually bear weight or even cause pain, leaving them in place does not usually affect the outcome.

Minimal after effects?

Patients do not need special shoes after their recovery. They continue to wear proper shoes. Fortunately, very few patients experience complications from the surgery; these could include delayed healing, infection, aching at the surgical site, instep or outside of the foot.

Insurance covers this procedure

Patients should have benefits for this procedure if they have surgical coverage. The patient, however, may be responsible for a portion of the surgical fees including insurance deductibles and co-payments.



Kenneth M. Leavitt, DPM

MEDICINE & RECONSTRUCTIVE SURGERY OF THE FOOT

Doctor of Podiatric Medicine

Fellow, American College of Foot & Ankle Surgeons

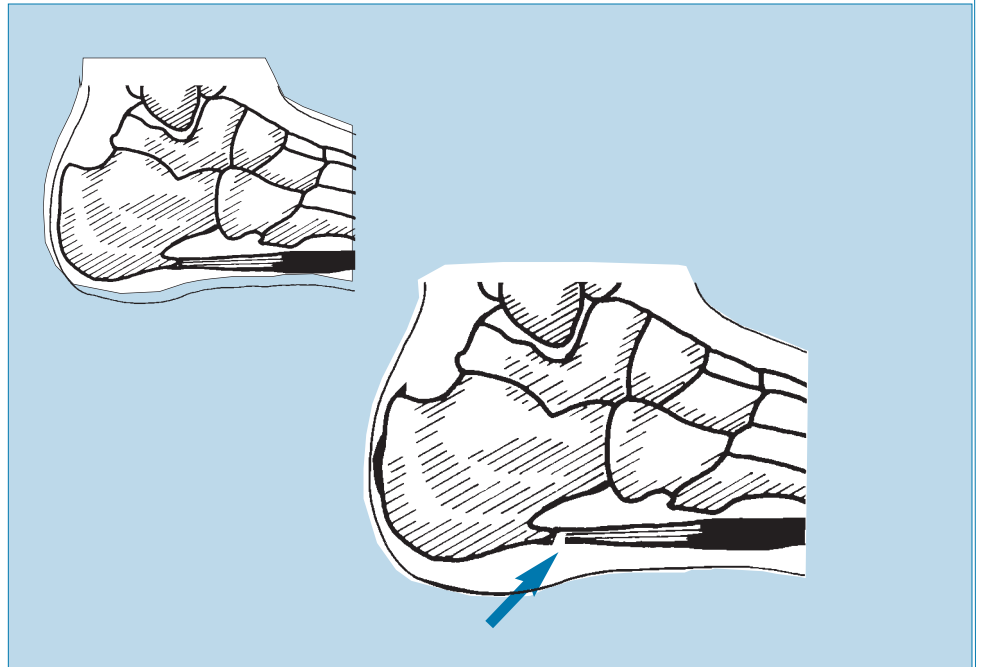
Diplomate, American Board of Podiatric Surgery, Certified in Foot Surgery



Heel Pain (continued)

Most patients walk away from the surgery. Many return to a regular shoe in less than a week.

Dr. Ken Leavitt



Before release of plantar fascia (upper left), painful inflammation builds up in the tissue where the ligament joins the heel bone. After release (right), tension is lessened, pain disappears, even though the spur is left in place.



Kenneth Martin Leavitt, D.P.M.

MEDICINE & RECONSTRUCTIVE SURGERY OF THE FOOT

New England Baptist Hospital, Suite 390 • 125 Parker Hill Ave. • Boston, MA 02120

TEL: 617-277-3800 • FAX: 617-277-3808

E-MAIL: kenleavitt@earthlink.net • www.bostonfootandankle.com