

PLANTAR FASCIOPATHY IN RUNNERS

Based on Physio Edge 062 Treatment of plantar fasciopathy in runners with Tom Goom @tomgoom

1 Pain dominant phase:

- a. Education about the pathology and prognosis to reduce level of threat
- b. Reduce aggravating activities such as running or prolonged standing
- c. Advise the patient to wear their most comfortable footwear
- d. Prescribe isometric toe flexion and isometric mid range calf raises (if effective in reducing pain)
- e. Consider adjuncts such as taping, massage, stretches and a gel heel cup

2 Load dominant phase:



- a. Use manual therapy and strengthening exercises to address any impairments identified during the objective assessment
- b. Cross training to maintain cardiovascular fitness
- c. Gradual plantar fascia loading progressing from double leg calf to single leg calf raises
- d. Commence the Rathleff et al. (2015) loading programme once patient able to tolerate single leg calf raises



3 Rathleff et al. (2014) loading programme

- a. Single leg calf raises performed barefoot with a towel under the toes to increase plantar fascial loading
- b. 3 second concentric, 2 second isometric pause at the top of the exercise, 3 second eccentric phase
- c. Increase the load by using a backpack and books
- d. Performed every other day for a period of 12 weeks
- e. Starts with 12 repetition max for 3 sets progressing to 10 repetition max after 2 weeks and then 8 repetition max after 4 weeks



- 4. Reintroduce running when the patient reports reduced morning stiffness, can tolerate walking, able to single leg calf raise and able to tolerate impact testing



- 5. Performing a run tolerance test can help to improve the patient's confidence and provide a starting point for a return to running programme



- 6. Provide the patient with a toolbox of techniques to use if the symptoms flare up to facilitate self-management

Week	Reps	Sets
1-2	12	3
3-4	10	4
5-6	8	5
7-12	8 (increasing load)	5

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