Richard C Galperin DPM

Volume 5, Issue 2 NEWSLETTER Feb 2021

**Foot News You Can Use**

**SCARY PLANTAR FASCIITIS STORIES**

Join / Like / Share

Richard C Galperin DPM

A Division of Podiatric Medical Partners of Texas (PMPT)

Plantar Fasciitis is probably the most common musculoskeletal foot condition we see. If you think about it, we put more pressure on the bottom of our feet than anywhere else in the body. The plantar fascia ligament takes a pounding every single day. Because of this pressure, it’s not a mystery why so many people develop pain and inflammation.

If you have pain in your heel or arch, consider yourself lucky if your diagnosis is only Plantar Fasciitis. This condition usually isn’t too difficult for us to solve. What **is** difficult to solve are a few other conditions that mimic plantar fasciitis symptomatically.

There are four main stories we see play out consistently when it comes to pain in the heel. Here they are in no particular order:

**The Plantar Fascia Tear**

The longer a person has pain in their heel, the higher the risk of a tear. Most tears happen after a few months of pain. The type of pain isn’t always different from typical Plantar Fasciitis. If traditional treatments don’t relieve the pain we’ll order an MRI. The biggest problem with a tear is the difficulty of healing it. Some people will require not putting pressure on their feet for a few weeks, while others will need surgery.

**The “Cracked” Heel Bone**

Chronic pain in the heel could be a bone problem. Again, the location and type of pain are similar to Plantar Fasciitis. An x-ray typically won’t reveal this type of crack. An MRI will indicate what’s called Bone Marrow Edema. Essentially this is like a cracked bone. Healing this is downright difficult without a minor surgery.

**Scar-Tissue Formation**

The longer a person has Plantar Fasciitis, the higher the risk of scar-tissue formation. Just like the other two conditions above, the pain is similar to Plantar Fasciitis. Scar-tissue in the heel won’t go away with cortisone, stretching, orthotics or physical therapy. There are treatment options for this condition, but they take longer to work than when treating Plantar Fasciitis.

**The Pinched Nerve**

Getting a pinched nerve in the heel is another risk of suffering with Plantar Fasciitis for too long. This might be the most difficult condition of the four mentioned. Nerve pain can occur when there’s no weight on the feet. If you have pain in your heel when sitting or lying in bed, you could have a pinched nerve.

**More often than not, none of these conditions happen when pain in the heel or arch is addressed within the first couple of months of it starting.** We have seen these four stories play out countless times because most people are in no hurry to consult with a specialist. If you, or someone you know, suffers with Plantar Fasciitis, seeking treatment as early as possible is your best option.



**Help Heal Their Heels**

It’s incredible how many people suffer

 with heel pain so much longer than necessary.

Some will discontinue exercising because of it.

If you hear of someone talking about

 their heel(s) hurting,

let them know we can help them.

We sincerely appreciate your kind referrals!

Dr. Galperin

 **Happy Valentine’s Day!**



**Yes! We’re open. We are following all of the recommended CDC safety measures.**

**Richard C Galperin DPM**

**801 N Zang Blvd Ste 103**

**Dallas, TX 75208**

**Phone (214) 330-9299**

[**www.drgalperin.com**](http://www.drgalperin.com)

**Office Hours:**

**Monday: 9:00am – 12:00pm - 1:00pm – 6:00pm**

**Tuesday: 8:00am – 12:00pm - 12:30pm – 4:30pm**

**Wednesday: 8:00am – 12:00pm - 12:30pm – 4:30pm**

**Thursday: 9:00am – 12:00pm - 1:00pm – 6:00pm**

**Friday, Saturday & Sunday - Closed**

****