

Plantar Fasciitis:

Prevalence, Risks and Treatment Options

PREVALENCE AND RISK

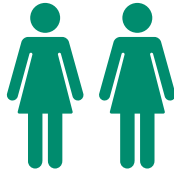


1 OUT OF 10
Americans
experiences
plantar fasciitis¹

It is the most common cause
of **HEEL PAIN** in adults¹



Women are **2.5 TIMES**
MORE LIKELY to report
plantar fasciitis than men¹



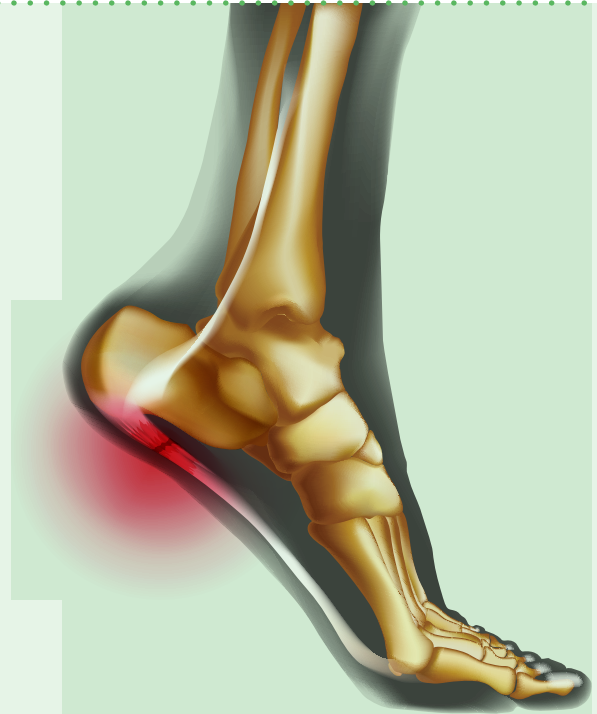
Peak incidence of plantar fasciitis is
between the **AGES OF 40 AND 60**¹

Plantar fasciitis may present bilaterally in
ONE-THIRD OF CASES²

Prevalence rates among runners
are as **HIGH AS 17.4%**³



While conservative therapy is effective over
time for most, **10% OF PATIENTS DO**
NOT RESPOND to conservative therapy⁴



TREATMENT OPTIONS

CONSERVATIVE THERAPY INCLUDES:

- Ice
- Massage
- Stretching
- Night splints
- Orthotics
- Medication
- Steroid or botulinum toxin injections
- Platelet-rich plasma (PRP)



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TREATMENT OPTIONS

Treatment options for chronic plantar fasciitis that has not responded to conservative therapy include:

- Fasciotomy (surgery)
- Focal extracorporeal shockwave therapy
- Plantar fasciitis embolization

SURGERY

Surgical fasciotomy is recommended as a last resort, typically for patients who do not respond to nonoperative therapy for at least 6-12 months.

However, the surgical fascia release **DOES NOT GUARANTEE A SUCCESSFUL OUTCOME.**⁵

44% of patients experience swelling and tenderness up to 10 years postoperatively.⁵

Complications of fasciotomy include:

- Persistent post-operative pain
- Plantar fascia rupture
- Biomechanical instability
- Nerve injury or entrapment
- Slow wound healing
- Recurrent heel pain
- Flattening of the longitudinal arch

ESWT

Extracorporeal shock wave therapy is a non-invasive alternative to surgery. This treatment is marked by a success rate of 74-76% and may require **UP TO THREE TREATMENTS.**⁶

HEALING from ESWT may be **SLOWED** with the use of anti-inflammatory medications.⁷

CONTRAINDICATIONS for ESWT include having had a corticosteroid injection within 4-6 weeks of the procedure, patients with implanted devices or implanted hormones and those with open wounds around the treatment site.

1. Nahin RL. Prevalence and Pharmaceutical Treatment of Plantar Fasciitis in United States Adults. J Pain. 2018 Aug;19(8):885-896.
2. LAPIDUS PW, GUIDOTTI FP. PAINFUL HEEL: REPORT OF 523 PATIENTS WITH 364 PAINFUL HEELS. Clin Orthop Relat Res. 1965 Mar-Apr;39:178-86.
3. Lopes AD, Hespagnol Junior LC, Yeung S.S., Costa L.O. What are the main running-related musculoskeletal injuries? A Systematic Review. Sports Med. 2012;42:891-905.
4. Davis PF, Severud E, Baxter DE. Painful heel syndrome: results of nonoperative treatment. Foot Ankle Int. 1994 Oct;15(10):531-5.
5. Rebekah Gibbons et al. Evaluation of Long-Term Outcomes Following Plantar Fasciotomy. Foot Ankle Int. 2018 Nov; 39(11):1312-1319.
6. R. Scheuer et al. Approaches to optimize focused extracorporeal shockwave therapy (ESWT) based on an observational study of 363 feet with recalcitrant plantar fasciitis. International Journal of Surgery Volume 27, March 2016, Pages 1-7.

7. Reilly JM, Bluman E, Tenforde AS. Effect of shockwave treatment for Management of Upper and Lower Extremity Musculoskeletal Conditions: a narrative review. PM R. 2018;10(12):1385-1403.
8. Hongying Chen, PhD et al. Association between plantar fascia vascularity and morphology and foot dysfunction in individuals with chronic plantar fasciitis. Journal of Orthopaedic & Sports Medicine Physical Therapy. Vol 43 Issue 10 Pages 727-734.
9. Rozli Gandhi, et al. Early outcomes of transcatheter arterial embolization using imipenem/cilastatin for plantar fasciitis refractory to conservative therapy. Br J Radiol 2024 Feb 28;97(1155):544-548.

PLANTAR FASCIITIS EMBOLIZATION (PFE)

- Individuals with unilateral chronic plantar fasciitis demonstrated **significantly greater vascularity** and thickened fascia on the affected side compared to the unaffected side.⁸
- PFE targets the source of inflammation within the fascia—the abnormal blood vessels that contribute to the condition.
- PFE has an **excellent safety profile** and success record.⁹
- Outpatient treatment for PFE is completed in a **single office visit** vs. up to three for ESWT.

Plantar fasciitis embolization is performed on an outpatient basis by the doctors at North Star Vascular & Interventional. They are among the very first clinics in the United States to perform this procedure and have been pioneers in other minimally invasive therapies for a host of chronic health conditions.

If you are interested in learning more about our plantar fasciitis treatment or to consult with us regarding a patient, please call (952) 960-9399.



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