

Running with Plantar Fasciitis: Is it a Good Idea?

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Introduction

Running is an energising, liberating, and exhilarating workout, but it can also be difficult. This is especially true for those who suffer from plantar fasciitis. If you have plantar fasciitis, which is a degenerative irritation of the ligament that links the front of your foot to your heel, you know how painful it can be to walk down the street or simply get out of bed [1,2].

While rest is usually recommended, many runners ask if they can continue to run while suffering from plantar fasciitis. Here's what the specialists have to say about jogging with plantar fasciitis, how to maintain running even if you're in pain, and how to cure this common orthopaedic problem.

If you have a mild to severe case of plantar fasciitis, you can continue running in the near term, according to PT, DPT, a physical therapist with Hudson Medical + Wellness.

If you have a minor case of plantar fasciitis, Joyce says you'll probably feel pain at the start of your run, but it should fade away as you go on. "This suggests your discomfort is most likely due to muscular tightness, and you can keep jogging as long as you work on your calf tightness, ankle mobility, and hip strength,"

If you suffer consistent pain from the start to the end of your run, a researcher recommends that you quit running. "You may start to induce tissue damage, create atypical movement patterns, increase your chance of major injury, or at the very least elevate inflammation in this situation," he stated. In more serious cases, an orthopaedic foot and ankle surgeon at Cedars-Sinai Medical Center can help.

It's vital to recognise that no matter how severe your plantar fasciitis is, continuing to run without treating the source of your symptoms is a prescription for future difficulties [3].

Best Practice Tips for Running with Plantar Fasciitis

If your plantar fasciitis is minor and you want to keep training, keep the following tips in mind before you leave the house.

Support your Feet

Taping and orthotics can both aid in arch support by reducing stress and aggravation to the plantar fascia. These taping techniques should be performed by a physical therapist, athletic trainer, or other healthcare professional. Before you spend money on an expensive pair of orthotics, taping is a fantastic technique to see if adding arch support will be beneficial [4].

Daily Stretching Exercises

You can maintain running by extending your ankle, calf, and plantar fascia many times a day.

In a 2020 study, researchers discovered a clear link between gastrocnemius (your primary calf muscle) tension and the degree of plantar fasciitis heel discomfort.

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Received 07 October 2021; **Accepted** 21 October 2021; **Published** 27 October 2021

Starting to run in simple intervals is fine if your symptoms are under control and you're stretching two to three times each day, according to Triche.

Joyce advocated establishing or maintaining good ankle mobility, particularly dorsiflexion and inversion, in addition to stretching.

Spend a few minutes stretching your feet, including your heel, after your body has warmed up.

Plantar fasciitis symptoms

- At the bottom of your heel
- Along the arch of your foot
- At the bottom of your mid-foot area (not as common as heel pain)
- When you first get out of bed in the morning (becoming less severe after a few steps)
- During the push-off phase while running
- That develops gradually over time
- That's dull or sharp
- That gets worse after activity

What is the normal treatment for plantar fasciitis?

If your heel pain doesn't go away after a few days of rest, you may require a more extensive treatment strategy.

A night splint is a device that you wear while sleeping to stretch your Achilles tendon and plantar fascia. The purpose is to alleviate heel pain in the morning.

Even while they provide relief, night splints should not be considered the only treatment for plantar fasciitis, according to Zumbusch. Instead, they should be considered an important part of a full treatment regimen [5].

If your pain persists beyond the initial therapy time, your doctor or physical therapist may discuss alternative treatment options with you, including:

- Bespoke orthotics
- Strassburg sock or night splint
- Casting and walking boots
- Corticosteroid injection
- Surgery

References

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How to cite this article: Iqbal, Javeed. "Running with plantar fasciitis: Is it a good idea?" *Physiother Rehabil* 6 (2021):249.