E-Poster

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Effectiveness of a Combined Treatment for Plantar Fasciitis With Extracorporeal Shockwave Therapy and Stretching on Pain and Quality of life

Topic: Physical Modalities

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BACKGROUND

Plantar fasciitis is a common cause of heel pain that results from inflammation and microtears of the plantar fascia, often due to repetitive stress, biomechanical factors, or improper footwear. It affects both athletes and the general population and can significantly impact daily activities and quality of life (QoL). The aim of study was to evaluate the effect of Extracorporeal Shock Wave Therapy (ESWT) combined with daily stretching on pain and QoL.

METHODS

A total of 24 patients with chronic plantar fasciitis were enrolled in this prospective study. One session of radial ESWT per week for five consecutive weeks, was indicated with daily stretching exercises and customized orthoses. During each ESWT session: 2500 shocks were administered to the injured tissue with an energy between 60-90mJ and frequency of 5-10Hz. Pain and QoL were assessed using : Visual Analog Scale (VAS), Modified Laitinen Pain Questionnaire (MLPQ), and Foot Health Status Questionnaire (FHSQ) at baseline and after six weeks of treatment.

RESULTS

Mean age was 43.5 years, with a female predominance. Average duration of pain was 7.6 weeks, mean VAS score decreased from 7 at baseline to three after six weeks. According to the MLPQ, 58.3% of patients reported a painkiller intake score of 3 before treatment, while 33.3% and 62.5% reported intake scores of 2 and 1, respectively, after six weeks. Functional impact score on the MLPQ was classified as severe (7-10) for 75% of patients prior to treatment, and as light (1-3) for 83.33% of patients after treatment. Mean FHSQ general health score was 59.2 at baseline and 62 at six weeks.

CONCLUSION

The combined approach of ESWT, stretching exercises, and orthoses is a promising treatment modality for plantar fasciitis, showing significant improvements in pain management, medication usage, functional impact, and QoL. Larger studies with longer follow-up periods are necessary to validate these findings.

Statement of Disclosures

None

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