

Efficacy of Homoeopathy in Plantar Fasciitis: Review Article

Dr Sreevidhya JS¹, Dr Aarathi Reddy², Maliga Monika³

¹HOD/Associate Professor, Department of Obstetrics & Gynaecology, MNR Homoeopathic Medical College, Sangareddy, Telangana State

²Assistant Professor, Department of Obstetrics & Gynaecology, MNR Homoeopathic Medical College, Sangareddy, Telangana State

³Intern, MNR Homoeopathic Medical College, Sangareddy, Telangana State

Corresponding Author: Maliga Monika

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ABSTRACT

Adults' heel pain is frequently brought on by plantar fasciitis. It is a clinical diagnosis because the patient typically appears with pain that worsens with the first few morning steps. Despite the fact that the ailment is self-limiting, due to the intensity of the agony, medical assistance is sought. If risk factors are changed and several therapy methods are started as soon as possible, symptoms will subside more quickly. This article discusses plantar fasciitis and lists the best available treatments at the moment.

Keywords: Heel pain, Symptoms, Homoeopathy, Treatment.

INTRODUCTION

Other names for plantar fasciitis (PF) include heel spur syndrome, painful heel syndrome, and plantar heel pain [1]. It is an enthesopathy of the plantar fascia's origin at the medial tubercle of the calcaneus (an abnormality or damage at the point of attachment of a ligament or tendon to bone) [2]. The thick tissue that forms the foot arch becomes inflamed as a result. Despite being frequently referred to as an inflammatory disease, researchers questioned if inflammation was indeed present throughout the entire procedure and therefore connected to the repetitive microtrauma caused by overstretching or overuse [3,4].

EPIDEMIOLOGY

Since it causes 80% of cases of heel pain, plantar fasciitis (PF) is one of the most frequent musculoskeletal (MSK) complaints of the foot [5]. 10% of the general population, according to researchers, will encounter it at least once in their lifetime [6]. Over one million doctor visits take place each year in the USA due to it [7]. Thought to just affect athletes, it has also been seen in those who lead sedentary lifestyles. Age and gender have no bearing on it [7,8].

ETIOLOGY/RISK FACTORS

Although the cause is unclear, there are many distinct pieces of information on potential risk factors [9]:

1. An excessively abrupt weight pressure on the foot brought on by being pregnant or obese. According to observations, there is a 2-fold increased risk for PF when the body mass index (BMI) is greater than 25 kg/m² [10].
2. Inflammatory arthritis, including spondyloarthritis and rheumatoid arthritis (RA).
3. Diabetic nephropathy [11]
4. hypothyroidism [12]
5. Osteoarthritis

The following are local causes of plantar fascia microtrauma that recur:

- a. Mechanical foot imbalances can be caused by the foot itself or by wearing flip-flops or other shoes with soft soles or poor arch support. Pes planus (flat feet), pes cavus (high arches), and decreased ankle dorsiflexion (equinus gastrocnemius) are among the foot and arch issues. Case-control studies revealed that there is an increased incidence of plantar heel discomfort due to the relationship between these mechanical risk factors [14,15].
- b. Studies on heel spurs (exostosis), which were found in a normal population's X-ray (85% of patients with plantar fasciitis symptoms compared to 46% of controls) [16], have produced mixed results.
- c. Long-distance running, particularly on hilly or downhill terrain [17].
- d. A typical factor that prolongs the foot's flexion and shortens the plantar fascia is a tight Achilles tendon. As a result, standing causes the plantar fascia to stretch and intensifies pain [18].
- e. Sudden changes in activity, including a sudden jump, beginning a new jogging regimen, or simply switching footwear, can readily subject the tissue to repetitive stress over a brief period.
- f. Jobs that require extended standing [20].

CLINICAL FEATURES

Based on the patient's medical history and physical examination, plantar fasciitis (PF) is clinically diagnosed. 'First-step pain' or 'post-static dyskinesia', which is pain or irritability at the heel rising after a time of non-weight bearing or inactivity, is the most frequently reported symptom of PF. For example, getting out of bed in the morning, standing up after spending several hours at a desk, or travelling for an extended period of time.

In extreme situations, any movement that stretches the fascia, such as toe walking, stair climbing, or being barefoot, will cause pain. As a result, relief from rest may extend from the medial tubercle of the calcaneum

or the middle portion of the heel pad to the medial longitudinal arch of the foot.

Localised point soreness along the medial tuberosity of the os calcis is the main physical finding [21,22].

The patient's pedal phalanges' dorsiflexion, which further stretches the plantar fascia (the windlass mechanism), may be the source of the pain [23].

1. The presence of risk factors is the primary diagnostic indicator for PF.

2. Heel ache

3. post-static dyskinesia

4. Heel pain that goes away with rest

INVESTIGATIONS

To rule out underlying endocrine and inflammatory diseases, laboratory testing is done. In order to rule out other causes of heel pain, such as calcaneal stress fractures (as opposed to calcaneal spurs, which are contentious in the pathophysiology of PF), X-rays are necessary [17]. In order to rule out other diagnoses that were not seen on the X-ray, such as a soft-tissue tumour, calcium deposit, or calcaneal stress fracture, MRI is performed for patients who are refractory to treatment.

When the diagnosis of plantar heel pain is uncertain, ultrasonography is the research imaging of choice since it is inexpensive, but it necessitates a trained professional

PROGNOSIS.

Without treatment, the normal course of PF is frequently self-limited and resolves in 80% of patients within 1-4 years [9]. Either the irritability or the incapacitating pain during an attack is what prompts individuals to seek medical assistance. To that end, it is recommended that conservative therapy be tried before more invasive ones

TREATMENT

There are many different forms of treatment for plantar fasciitis:

1. Conservative treatment (patient education, orthotics, soft tissue therapy, heat, ice, exercise, night splints,

- chiropractic therapy, electric modalities, acupuncture, and taping)
2. External shockwave therapy
 3. Medicine
 4. Injection of corticosteroids
 5. Surgical procedure

CONSERVATIVE TREATMENT

Due to the self-limiting nature of the ailment, there is no universally accepted consensus on how to treat plantar fasciitis. However, it is more cost-effective to start with low-risk conservative therapies, keeping in mind that patients who still experience symptoms after two to three weeks of conservative treatment should consider other options.

PHYSIOTHERAPY:

The physiotherapy department offers a wide range of techniques, from the application of ice to stretching exercises. Stretching the plantar fascia and Achilles tendon, which relieves pressure on the plantar fascia, is regarded as one of the characteristics in the management of PF.

FOOT ORTHOTICS:

A wide range of orthotic shoes, including both custom-made and over-the-counter versions, are available. Examples include silicone heel pads, felt heel pads and rubber heel cups. The purpose of orthotic therapy is to give comfort, support the medial arch, and elevate the heel to lessen stress on the plantar fascia. It is an asset for overweight people.

SPLINT

Prior to administering another corticosteroid injection, a posterior splint should be taken into account. It is worn at night to maintain a steady, modest stretch of the plantar fascia by holding the patient's feet in the maximal dorsiflexion with their toes extended. This avoids fascial contraction and stiffening, especially in the morning, and enables the feet to recover at a functional length.

ESWT

Extracorporeal Shock Wave therapy is suitable for managing pain

SURGERY

Rarely is surgery necessary. Partial plantar fasciotomies, which can be performed openly, subcutaneously, or endoscopically, are the most typical procedure. Due of the quick healing time, closed is favoured than open. 70–90% of surgical releases are successful, and recuperation takes several weeks to a few months.

NUTRITIONAL SUPPLIMENTATION

To reduce the discomfort, adding the following dietary supplements has been advised: Omega-3 fatty acids, glucosamine, vitamin C, and zinc. Therefore, keeping in mind that there is no evidence to support it, and if a person were to use it, it would be in addition to conservative therapy under the supervision of a doctor.

HOMOEOPATHIC MANAGEMENT

Homoeopathic remedies are chosen following a thorough case-analysis that includes the patient's medical history, physical examination, and individualising assessment. While giving importance to these symptoms, other peculiarities related to the patient's mental and physical constitution should also be taken into consideration in order to achieve an effective and long-lasting cure. The medications listed below indicate their therapeutic affinity in a variety of conditions related to heel pain.

1.ALUMINA

Joint pain in the feet when seated that is brought on by weariness. walking-related foot pain in the soles. scorching sensation under the toes. The heels are numb. Tender soles that feel soft and puffy when you step. Worse: when you first wake up in a warm place; better: outside; after doing cold laundry; in the evening

2.RHUS TOX

Injuries, excessive lifting, or overstretching can cause swelling, stiffness, and paralysing feelings in the joints. lameness, stiffness, and discomfort after getting up in the morning or after a period of rest; caused by constant motion. ripping pains in the fascia, ligaments, and tendons. feet tingling. When resting on one foot, the ankle bones experience shooting and twisting pain. evening swelling in the feet. Foot numbness and a light colour

3.AMMONIUM MUR

Pain as if pulling on the heels. Toes that are throbbing and tingling with sudden jerks, pullings, or gunshots. tension in the joints as a result of muscle contraction. Extremely painful ulcerative heel pain brought on by rubbing. In the evening, the feet in bed become very cold.

4.CAUSTICUM

Walking causes pain in the instep, the ankle bones, the feet's soles, and the toes. Pains in the soles of the feet that are neuralgic. Instep contraction accompanied by intense discomfort when stepping. the foot swelling. Feeling of tingling in the foot soles.

5.LEDUM PAL

Walking causes stiffness in the feet and agony in the soles that feels like blood is inside them. swelling of the legs and feet that is either inflammatory or oedematous. Toes are experiencing sharp sensations when you're sleeping. Swollen ankles. Painful soles make it difficult to walk on them

6.MERC SOL

Instep or heel swelling coupled with piercing, shooting sensations. Intense discomfort in the foot. sweaty feet and a cold sensation. Metatarsal bone edoema that is painful. swelling in the feet. Bone and limb pains, which are worse at night

7.PULSATILLA

Hot swelling in the legs, or just in the back or soles of the feet, occasionally accompanied by shooting pains when the affected areas are touched and when moving. the balls of the toes and the soles of the feet experience a painful numbness [37]. (Swollen, edematous feet in the evening. towards nightfall, piercing shots and acute pains in heels. shootings in the toes' tips and bottoms of the feet. As nighttime approaches, dull discomfort in the heels gets greater when the injured limb is left hanging.

8.SABINA

Periodic pain in the lower portion of the left heel where it connects to the sole. On the right and left heels, there are pointed stitches from inner out. foot bones are being torn under pressure. shooting into the metatarsal and heel bones. Joint pain due to arthritis

9.BERIBERIS VULGARIS

One of the best homoeopathic treatments for plantar fasciitis, where standing exacerbates heel discomfort, is Berberis Vulgaris. Few people who require Berberis Vulgaris will particularly complain of heel ulcers. Another sign to utilise Berberis Vulgaris is pain in the balls of the feet as you step.

10 VALARIANA

It is very recommended for plantar fasciitis when walking relieves heel discomfort. The heel discomfort gets worse when you sit.

CONCLUSION

An overuse injury that interferes with daily activities is plantar fasciitis. In the majority of individuals, it is a clinical diagnosis and a self-limited illness. Plantar fasciitis can be effectively treated using homoeopathic medications. Plantar fasciitis symptoms such as inflammation are reduced with homoeopathic remedies. Depending on how the symptoms present themselves, the homoeopathic prescription for plantar fasciitis differs from case to instance.

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