06

Plantar Heel Pain

Plantar Fasciopathy

That first-step heel stab in the morning that makes the bathroom feel miles away.

INJURY
Plantar Heel Pain / Plantar Fasciopathy

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SERIES
Injury Hub: ***Top 20***

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06 INJURY HUB

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CAN I KEEP RUNNING?

You may keep short easy runs if first-step morning pain is not escalating week to week and the heel settles by the next day. If every morning is getting worse, the running dose is still too high.

TYPICAL TIMELINE

Many runners keep some modified running. Symptoms commonly take 4 to 12 weeks to settle. Stubborn cases can drag for several months if load is not managed properly.

WHAT IT IS IN LIESEL'S WORDS

Plantar heel pain, often called plantar fasciitis, is a load-intolerance problem of the plantar fascia and the surrounding heel tissues. The plantar fascia is a thick band of connective tissue that runs from your heel bone along the underside of your foot to your toes. Think of your foot arch as a bow and the fascia as the bowstring. When that bowstring gets overloaded, it protests.

In runners it nearly always starts as a sharp first-step pain in the morning, with tenderness under the heel or slightly toward the inside. After a few minutes of walking it often eases off, which leads many runners to think it is not serious. It is.

This is a load and capacity story. The tissue has more demand on it than it currently has the capacity to handle.

LIESEL'S NOTE

The morning hobble to the bathroom is the diagnosis. If you know that feeling, you know this injury.

HOW IT USUALLY FEELS

The first few steps after getting out of bed are the worst. Sharp or stabbing pain under the heel, often toward the inner side. After walking around for a few minutes it frequently eases, which is exactly why runners keep running on it far longer than they should.

- Sharp heel pain on the first steps in the morning or after sitting
- Pain under the heel or inner heel, sometimes radiating into the arch
- Eases after warming up, returns after long runs or at the end of the day
- Pressing firmly on the inner heel bone is tender
- Pulling the toes back toward the shin stretches and provokes the fascia
- Long standing blocks, hard floors without support, and barefoot walking make it worse

WHY RUNNERS GET THIS — REAL REASONS

This injury rarely appears out of nowhere. It shows up when load quietly outruns tissue capacity. The usual culprits:

- Rapid mileage increase or a sudden jump in time on feet.
- Tight calves that limit ankle mobility, forcing the fascia to absorb more strain.
- Weak foot and calf muscles that are not doing their share.
- Sudden return to running after time off, when the fascia has deconditioned.
- Unsupportive footwear, worn-out shoes, or going barefoot on hard floors too often.
- Hill work or speed work added too quickly before the foot had the capacity for it.

> **REALITY CHECK**
> *Many runners spend months treating this passively and wondering why it keeps coming back. Passive treatment calms it down. Calf and foot strength keeps it away.*

THE BIGGEST MISTAKES I SEE

- Stretching aggressively first thing in the morning before the tissue is ready
- Relying on rest alone without building calf and foot capacity.
- Going barefoot around the house during a flare, treating the heel to hard floor contact all day.
- Assuming new shoes or orthotics will fix it without addressing the load.
- Running through escalating morning pain because it warms up after five minutes.

THE ROAD BACK TO RUNNING

Returning to running is not the same as returning to full training. The fascia needs load to adapt, but it needs graduated load, not the same load that caused this in the first place.

- **Manage the load first.** Reduce the biggest triggers: long runs, hard surfaces, hills, and barefoot time on hard floors. Keep moving at a tolerable level.
- **Start calf and foot work early.** Heavy calf raises and foot intrinsic exercises within the first week if pain-free. Passive rest does not fix this. Loading does.
- **Use the 24-hour response as your guide.** If the next morning is notably worse after a run, that run was too much. Back off one step and rebuild.
- **Add volume before intensity.** More easy kilometres on flat ground before you bring in hills, speed, or longer runs.
- **Keep the shoes on at home.** Supportive footwear throughout the day, not just when running. Slippers at minimum. Hard floor barefoot time is a hidden load driver.

QUICK TIP

Before your first steps in the morning, do 10 slow calf raises while still sitting on the edge of the bed. It warms the tissue before you load it cold.

REHAB PLAN KEY EXERCISES

Start Phase 1 immediately and progress when you can do each exercise pain-free with good form. Tendons and fascia adapt slowly. Consistency over weeks beats intensity over days.

Plantar Fascia Stretch Pull toes toward shin before first steps. Hold 20-30 sec. **3 x 20-30 sec · Morning, before walking**	**Calf Raise (Two-Leg)** Full range, slow descent. Progress to single-leg. **3 x 15 · Daily**
Calf Raise (Single-Leg) Single leg, full range, add load when strong enough. **3 x 12 · Daily**	**Short-Foot Exercise** Lift arch without curling toes. Hold 5 sec each rep. **3 x 10 · Daily**
Towel Scrunches Scrunch a towel with toes. Trains intrinsic foot muscles. **2 x 20 · Daily**	**Eccentric Calf Drop** Raise on two legs, lower slowly on one. Control the descent. **3 x 10 · 3x week**

CROSS-TRAINING THAT WORKS

Stay fit without making it worse. These are generally well tolerated:

- Pool running and swimming, zero impact on the heel.
- Cycling with moderate resistance, supportive shoes, no standing on pedals.
- Elliptical if it does not provoke symptoms.
- Rowing if ankle dorsiflexion is not painful.
- Avoid: high-impact activities, barefoot yoga on hard floors, jumping progressions.

LIESEL'S PEN

Heel pain can make even a trip to the bathroom feel unfair. I always remind runners that this one responds beautifully to boring consistency. Better calf strength, smarter shoe choices, and a thousand small daily decisions that add up to a healed heel. I have seen runners manage this for years by chasing passive treatments and never building the foot strength the fascia was asking for. The ones who get it right are the ones who do the calf work every day, even when the pain is gone. Especially when the pain is gone.

INJURYHUB · QUICK REFERENCE

Plantar Heel Pain

Plantar Fasciopathy — everything you need at a glance.

PAIN LOCATION	COMMON TRIGGERS
Sharp pain under the heel, inner side. Worst on first steps after rest. Tenderness on pressing the heel bone.	*Rapid mileage increase. Tight calves. Weak foot muscles. Barefoot time on hard floors. Unsupportive footwear.*
KEY FIX	**RECOVERY TIMELINE**
Load management first, not passive treatment. Build calf and foot strength. Graduated return to running.	*4 to 12 weeks for most cases with consistent rehab. Stubborn or chronic cases can take longer if load is not managed.*

REAL TALK FROM LIESEL

Plantar heel pain has a reputation for being stubborn. In my experience it is only stubborn when the runner keeps doing the thing that caused it while waiting for passive treatments to fix it. Calf strength and load management are not optional extras. They are the treatment. Do the boring work and this heel will carry you a very long way.

EVIDENCE BASE

Plantar Heel Pain Best Practice Guide: A Delphi Consensus Study (2023)
Medical Imaging for Plantar Heel Pain: A Systematic Review (2022)
Common Running Injuries: Evaluation and Management — AAFP (2018)

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