Surgical treatment of recalcitrant plantar fasciitis

Sammarco, G. J. and Helfrey, R. B. Surgical treatment of recalcitrant plantar fasciitis. Foot Ankle Int. 1996 Sep; 17(9):520-6.

Abstract: Twenty-six patients (35 feet) underwent partial plantar fasciectomy with neurolysis of the nerve to the abductor digiti quinti muscle. Nonsurgical treatment for plantar fasciitis had been unsuccessful in these patients. Patients were followed after surgery for an average of 37.5 months. Six patients were male and 20 patients were female; the average age was 49 years. All patients had failed to respond to nonsurgical treatment for an average of 21.5 months. In addition to routine history and physical examination patients were evaluated before and after surgery with a subjective foot rating system, and a detailed questionnaire was used to assess post-operative functional outcome. Thirty-two patients (92%) had a satisfactory functional outcome, and three patients (8%) had an unsatisfactory result (21 excellent, 11 good, 3 fair, 0 poor). The Maryland Foot Score increased from a preoperative average of 74.8/100 points to a postoperative average of 90.6/100 points. Four patients (11%) had postoperative complications, including superficial wound infection (two patients), deep venous thrombosis (one patient), and superficial phlebitis (one patient), all of which resolved uneventfully with treatment. Ten patients (28.6%) reported some degree of heel pain after surgery. All 10 patients denied limitation in activity related to postoperative pain. The average period before return to daily activity and restricted work duty was 5.6 weeks and to full work duty without restriction was 8.7 weeks. Although the length of time for partial or complete resolution of symptoms is variable, a successful treatment outcome can be expected in most patients who are treated for recalcitrant plantar fasciitis.