

## **Pediatric Heel Pain**

Heel pain in children is not uncommon. It is something however, that warrants medical evaluation and attention. Heel pain in children should not be ignored. There are many problems that can cause heel pain in children, and the cause can only be determined by your doctor. If your child is experiencing heel pain, it should be evaluated by your podiatric foot and ankle surgeon.

The most common cause of heel pain in children is a disorder called calcaneal apophysitis, also known as Sever's disease. This is the most commonly experienced by children ages 8 – 14 years old.

### **What is calcaneal apophysitis?**

The heel bone, the calcaneus, does not stop growing in children until the mid to late teen years. The bone grows from an area called the growth plate, or the physis. This is a weak area towards the back of the heel. Stress on this growth plate can cause inflammation, known as calcaneal apophysitis.

### **How does a child get calcaneal apophysitis?**

This is most commonly seen in children who are active or obese. Muscle strain and repetitive stress can lead to tension and pain in the heel growth plate. Increased walking and activity can make this pain worse. It can occur in one or both feet.

### **How is the diagnosis of calcaneal apophysitis made?**

The podiatric surgeon will go through a full medical history review and ask questions related to your child's pain. The surgeon will examine your child's foot and leg and often times will obtain x-rays of the feet. In some cases the surgeon may order a bone scan, a MRI (magnetic resonance imaging), or a CT or CAT scan (computed tomography scan). Blood work may sometimes be ordered as well, if the surgeon suspects some rarer causes of heel pain.

### **How is calcaneal apophysitis treated?**

- home exercise programs

Your surgeon may recommend an exercise program that consists of stretching exercises intended to stretch out and lengthen the soft tissue that attach on either side of the heel growth plate, the achilles tendon and the plantar fascia.

- physical therapy

Physical therapy modalities are sometimes prescribed to promote healing of the inflamed tissue.

- medications

Anti-inflammatory medications are sometimes prescribed to help reduce pain and inflammation of the area. Sometimes these are recommended in an over the counter form, such as ibuprofen. Other times a prescription anti-inflammatory may be necessary.

- orthotic devices

Over the counter temporary shoe inserts are often times started in an effort to cushion the heel during activity. These are usually started until a custom made orthotic can be obtained. A custom made orthotic is custom made to your child's feet. There are many variances in foot structure and a custom made device can control abnormal motion and position specific to your child's foot structure, which can play a role in this issue healing or reoccurring.

- reduce activity

Because increased activity can worsen this pain, decreasing the activity that causes this pain to flare is important.

- immobilization

In some cases that are more severe, it is necessary to place the child's leg in a cast that prevents motion of the foot and ankle. This promotes healing of the area. In some patients crutches are necessary to prevent any weight on the painful foot.

- surgery

There are some cases that require surgery to lengthen the tendon or correct other structural foot issues.

### **What are other causes of heel pain in children?**

Achilles tendonitis, plantar fasciitis, fractures, bone tumors, osteomyelitis/bone infection, neuritis, bursitis

### **How can I prevent calcaneal apophysitis in my child?**

Avoid activity beyond a child's ability, avoid obesity, chose well-constructed, supportive shoes that are appropriate for the activity your child is participating in. If you are concerned about possible abnormality of your child's foot structure, have it evaluated by a podiatric surgeon before pain occurs.

### **What if my child was treated for calcaneal apophysitis and their pain recurs?**

Often times heel pain can recur even after having been treated, due to continued growing of the heel bone. This can be a sign of the previously diagnosed condition, or it can indicate a different problem. If your child begins to experience heel pain again it should be evaluated by your podiatric surgeon.

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