

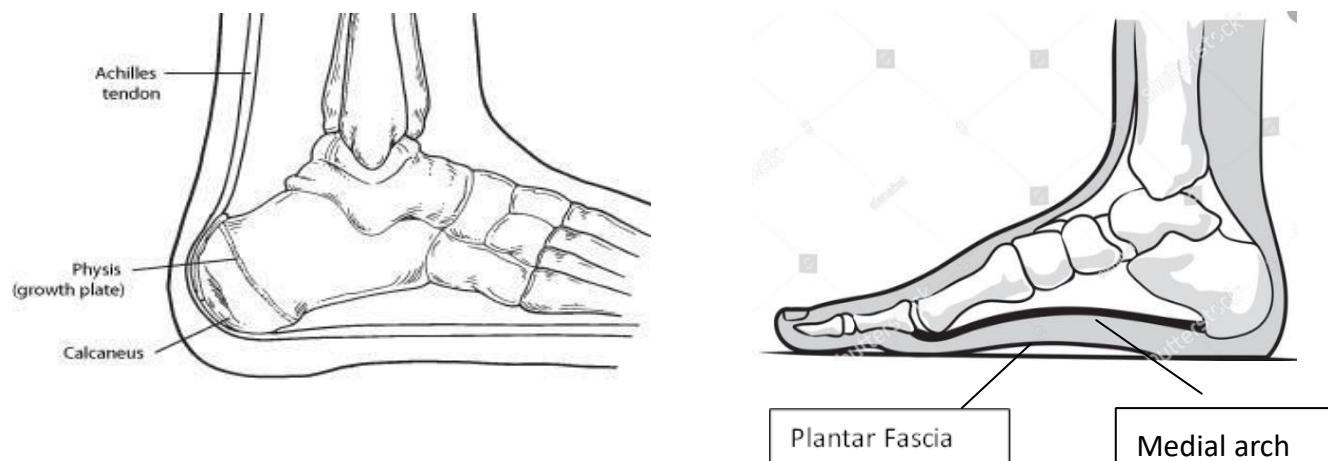
Patient information

Children's Foot and Heel Pain (CFHP)

What is Children's foot and heel pain (CFHP)?

CFHP is a common condition in children that causes pain around the heel bone (calcaneus) and inside of the foot (medial arch). It affects children going through a growth spurt and /or those who participate in lots of physical activity especially running or jumping.

Anatomy of the foot and heel



What causes heel pain?

When there is a growth spurt the bones grow quicker than the surrounding soft tissue (muscles, ligaments, tendons) which can cause tightness in the muscles of the calf. The calf muscles form the Achilles tendon which is attached to the heel bone. The Achilles tendon pulls on the heel bone which causes pain. Lots of physical activity involving running can also cause further pulling of the Achilles tendon on the heel bone and increase pain.



What causes foot pain?

The combination of children being active and commonly having flexible flat feet (low or immature arch) can cause a pull on both the plantar fascia and Achilles tendon causing further irritation to the heel.

What are the symptoms of CFHP?

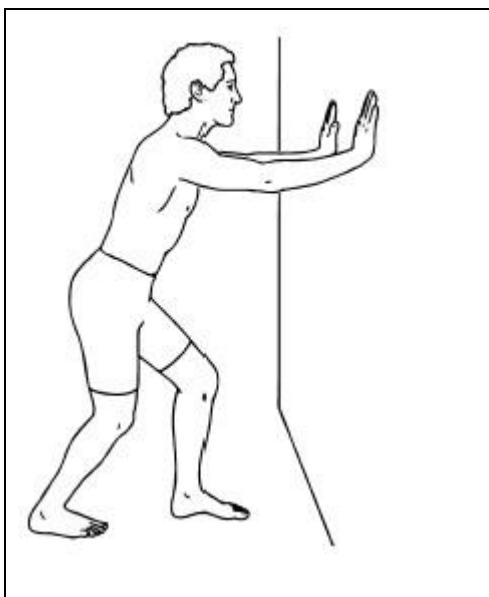
- Pain in the back of or under the heel and inside of the foot and can be on one or both sides and in some cases swelling
- Worsening pain with prolonged activity
- Toe walking or new limp due to pain
- Pain improved with rest

What symptoms might need to be reviewed further by your GP?

- Regular or constant night pain
- Reluctance to weight bear
- Worsening swelling not improved with elevation and rest
- Ankle pain with hip or knee pain
- New limp without pain
- New altered foot positioning i.e foot turning outwards on one side
- Pain not settled with rest or reduction of activity
- Early morning stiffness that takes more than 20 minutes to resolve

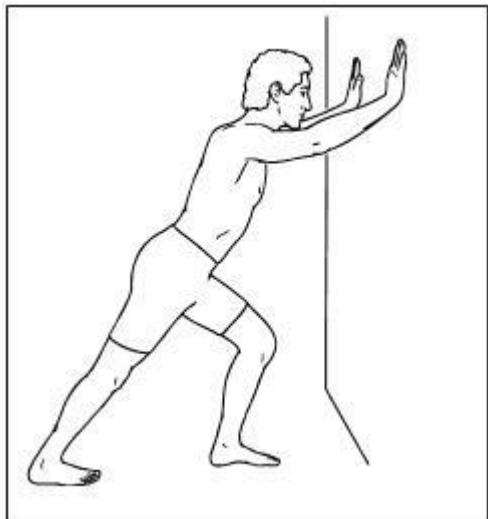
Initial management at home

- A period of reduced activity is recommended initially to help settle the pain
- Continuing with sport and physical activities will not be harmful, but may increase, or prolong the pain. A temporary reduction in sport, or trying a different sport which doesn't involve as much running or jumping, may be useful. In some cases it may be necessary to stop sport until pain has started to subside and then gradually build back up
- Supportive shoes which are not too tight around the heel bone may be recommended to reduce irritation
- Temporary gel heel pads into shoes can be helpful
- Ice wrapped in a towel on the heel may help reduce pain □ Exercises can be helpful to stretch the tight calf muscles



Calf stretch- soleus muscle

- Stand with one leg in front of the other, with both feet pointing forwards. Place hands on the wall for support.
- Keep back knee bent with the heel pressed to the floor.
- You should feel a pull in the calf muscle of the back leg and heel.
- Hold this position for 30 seconds. Repeat two times per day.

**Calf stretch- gastrocnemius muscle**

- Stand with one leg in front of the other with both feet pointed forwards. Place hands on the wall for support.
- Keep back knee straight with heel pressed to the floor.
- You should feel a pull in the calf muscle of the back leg and heel.
- Hold this position for 30 seconds. Repeat two times per day.

How quickly will my exercises start to make a difference?

Usually you won't feel any noticeable difference for at least three weeks, but your foot and heel pain should start to feel normal again after about eight weeks. If you find the exercises increase your pain or it hurts your foot/heel to do them then you should stop doing them. If the exercises fail to work you should see your Consultant or GP to ask for a referral to physiotherapy for a more in depth assessment and individualised treatment programme.

How soon will I be able to return to normal activities?

If you are experiencing severe pain or you find that the exercises aren't being effective it is advisable to stop all sports for a few weeks whilst your body adapts to the growth and allow the muscles time to stretch. After a few weeks slowly reintroduce the exercises and sport and pace your return to previous level.

Sources of information

- www.healthychildren.org/English/health-issues/conditions/heel-pain-and-severs-disease.aspx
- www.nhs.uk/conditions/heel-pain/causes/

Important information

The information in this leaflet is for guidance purposes only and is not provided to replace professional clinical advice from a qualified practitioner.

Disclaimer

Please note this is a generic ESHT information sheet. If you have specific questions about how this relates to your child, please ask your doctor. Please note this information may not necessarily reflect treatment at other hospitals.

Your comments

We are always interested to hear your views about our leaflets. If you have any comments, please contact the Patient Experience Team – Tel: 0300 131 4731 or by email at: eshtr.patientexperience@nhs.net

Hand hygiene

The Trust is committed to maintaining a clean, safe environment. Hand hygiene is very important in controlling infection. Alcohol gel is widely available at the patient bedside for staff use and at the entrance of each clinical area for visitors to clean their hands before and after entering.

Other formats

If you require any of the Trust leaflets in alternative formats, such as large print or alternative languages, please contact the Equality and Human Rights Department.

Tel: 0300 131 4500 Email: esh-tr.AccessibleInformation@nhs.net

After reading this information are there any questions you would like to ask? Please list below and ask your nurse or doctor.

Reference

The following clinicians have been consulted and agreed this patient information:

Dr Danielle Vidler – Consultant and Clinical lead Emergency Department CQ

Mr Utham Shanker – Consultant and Clinical lead Emergency Department EDGH

The directorate group that has agreed this patient information leaflet:

URGENT CARE

Next review date: December 2027

Responsible clinician/author: Emergency Department Consultants

© East Sussex Healthcare NHS Trust – www.esht.nhs.uk