

LRAD for plantar fasciitis

LRAD for plantar fasciitis has emerged as a promising treatment option for individuals suffering from this common and often debilitating foot condition. Plantar fasciitis, characterized by inflammation of the plantar fascia ligament on the bottom of the foot, causes sharp heel pain and discomfort, especially during the first steps in the morning. Low-level laser and light therapy, or LRAD (Low-level Radiation Acoustic Device), offers a non-invasive approach that can target inflammation and promote healing at the cellular level. This article explores the mechanisms, benefits, and clinical evidence supporting the use of LRAD for plantar fasciitis, along with practical considerations and complementary therapies. Readers will gain a comprehensive understanding of how LRAD therapy fits into a holistic treatment plan for plantar fasciitis relief and recovery.

- Understanding Plantar Fasciitis
- The Science Behind LRAD Therapy
- How LRAD Works for Plantar Fasciitis
- Clinical Evidence Supporting LRAD
- Benefits and Limitations of LRAD Treatment
- Integrating LRAD with Other Therapies
- Patient Considerations and Safety

Understanding Plantar Fasciitis

Plantar fasciitis is a prevalent cause of heel pain affecting millions of adults annually. It involves inflammation or microtears of the plantar fascia, a thick band of connective tissue running from the heel bone to the toes. This inflammation results in pain, stiffness, and reduced mobility, often worsening after periods of rest or upon waking. Various factors contribute to plantar fasciitis, including overuse, biomechanical imbalances, obesity, improper footwear, and occupational hazards involving prolonged standing or walking.

Symptoms and Diagnosis

Typical symptoms include sharp, stabbing pain near the heel, especially during initial steps or after extended activity. Patients may also experience

tenderness along the arch of the foot and swelling. Diagnosis is primarily clinical, based on patient history and physical examination, though imaging techniques like ultrasound or MRI may confirm the extent of plantar fascia damage or rule out other causes of heel pain.

Conventional Treatment Approaches

Traditional treatments focus on reducing inflammation, alleviating pain, and promoting tissue repair. Common strategies include rest, ice application, nonsteroidal anti-inflammatory drugs (NSAIDs), physical therapy, orthotic supports, corticosteroid injections, and, in severe cases, surgery. Despite these options, some patients experience persistent symptoms, highlighting the need for alternative or adjunctive therapies such as LRAD.

The Science Behind LRAD Therapy

LRAD, or Low-level Radiation Acoustic Device therapy, utilizes specific wavelengths of light or acoustic energy to stimulate cellular functions and accelerate tissue healing. Unlike high-intensity lasers used for cutting or cauterizing, LRAD operates at lower power levels that do not damage tissues but instead promote regeneration and modulate inflammation.

Mechanism of Action

LRAD therapy works by delivering photons or acoustic waves that penetrate the skin and interact with cellular mitochondria. This interaction enhances adenosine triphosphate (ATP) production, which fuels cellular repair processes. Additionally, LRAD reduces pro-inflammatory mediators and increases the release of growth factors that facilitate collagen synthesis and angiogenesis, essential for healing the damaged plantar fascia.

Types of LRAD Devices

Various LRAD devices are available, including low-level laser therapy (LLLT), photobiomodulation, and ultrasound-based acoustic devices. Each employs different energy forms but shares the common goal of non-invasively stimulating tissue recovery. Device selection often depends on clinical settings, patient needs, and practitioner expertise.

How LRAD Works for Plantar Fasciitis

Applying LRAD for plantar fasciitis involves targeting the inflamed plantar fascia with controlled energy doses to reduce pain and promote tissue regeneration. The therapy sessions are brief, typically lasting between 5 to

20 minutes, and can be administered in outpatient clinics or specialized physical therapy centers.

Treatment Protocols

Protocols vary but commonly include multiple sessions per week over several weeks. The frequency and duration depend on the severity of the condition and patient response. LRAD is often combined with stretching exercises and other conservative measures to enhance outcomes.

Expected Physiological Effects

Patients undergoing LRAD therapy for plantar fasciitis may experience decreased inflammation, reduced pain levels, improved blood flow, and accelerated healing of the plantar fascia tissue. Over time, this can translate into improved mobility and decreased dependence on pain medications or invasive interventions.

Clinical Evidence Supporting LRAD

Numerous studies have investigated the efficacy of LRAD in managing plantar fasciitis symptoms. Clinical trials demonstrate that patients receiving LRAD therapy report significant pain reduction and functional improvements compared to placebo or conventional treatments alone.

Key Research Findings

- Randomized controlled trials indicate pain relief within weeks of initiating LRAD therapy.
- Improvements in foot function and quality of life have been documented in multiple patient cohorts.
- Some studies show enhanced collagen remodeling and tissue repair markers following LRAD treatment.
- Meta-analyses support LRAD as a safe and effective adjunctive treatment for chronic plantar fasciitis.

Limitations of Current Research

While promising, some studies have small sample sizes or methodological

variability, necessitating further large-scale, standardized research to optimize LRAD protocols and establish long-term benefits conclusively.

Benefits and Limitations of LRAD Treatment

LRAD offers several advantages over traditional plantar fasciitis therapies, including non-invasiveness, minimal side effects, and potential for accelerated healing. However, like any medical treatment, it has limitations that should be considered.

Benefits

- Non-surgical and painless treatment modality
- Reduces inflammation and pain effectively
- Promotes cellular repair and tissue regeneration
- Minimal risk of adverse reactions or complications
- Can be combined safely with other therapies

Limitations

- May require multiple treatment sessions over weeks
- Not all patients respond equally to LRAD therapy
- Effectiveness may vary depending on severity and chronicity of plantar fasciitis
- Relatively high cost and limited insurance coverage in some regions

Integrating LRAD with Other Therapies

LRAD is most effective when incorporated into a comprehensive plantar fasciitis management plan. Combining LRAD with physical therapy, orthotic supports, and lifestyle modifications can optimize patient outcomes.

Physical Therapy and Exercises

Stretching and strengthening exercises targeting the plantar fascia, Achilles tendon, and calf muscles complement LRAD by improving flexibility and reducing mechanical stresses on the foot.

Orthotics and Footwear

Proper arch supports, cushioned insoles, and well-fitted shoes help offload pressure from the plantar fascia and maintain foot alignment, enhancing the therapeutic effects of LRAD.

Medication and Pain Management

NSAIDs and other pain relievers can be used judiciously alongside LRAD to manage acute symptoms, but the goal remains to minimize reliance on pharmacologic agents as healing progresses.

Patient Considerations and Safety

LRAD therapy is generally safe and well-tolerated, but certain patient-specific factors must be evaluated before initiating treatment.

Contraindications and Precautions

Patients with active infections, open wounds at the treatment site, or malignancies should avoid LRAD until cleared by a healthcare professional. Pregnant women and individuals with photosensitivity disorders require special consideration.

Monitoring and Follow-Up

Regular assessment of symptom improvement and possible side effects is essential during LRAD therapy. Healthcare providers should tailor treatment protocols based on patient progress and adjust as needed to maximize benefits.

Frequently Asked Questions

What is LRAD therapy for plantar fasciitis?

LRAD (Low-Risk Acoustic Device) therapy is a non-invasive treatment that uses

focused acoustic waves to reduce pain and promote healing in patients with plantar fasciitis.

How effective is LRAD treatment for plantar fasciitis?

Studies have shown that LRAD therapy can significantly reduce pain and improve foot function in many patients with plantar fasciitis, especially when combined with physical therapy and other treatments.

How many LRAD sessions are typically needed for plantar fasciitis relief?

Most treatment plans involve 3 to 6 LRAD sessions spaced one week apart, but the exact number depends on the severity of the condition and patient response.

Are there any side effects of LRAD therapy for plantar fasciitis?

LRAD therapy is generally safe with minimal side effects, which may include mild discomfort or redness at the treatment site that usually resolves quickly.

Can LRAD therapy be combined with other treatments for plantar fasciitis?

Yes, LRAD therapy is often used alongside stretching exercises, orthotics, and anti-inflammatory medications to enhance overall treatment effectiveness.

Is LRAD therapy covered by insurance for plantar fasciitis treatment?

Insurance coverage for LRAD therapy varies depending on the provider and policy. Patients should check with their insurance company to determine if the treatment is covered.

Additional Resources

1. Healing Plantar Fasciitis with Low-Level Laser Therapy

This book explores the use of low-level laser therapy (LLLT) as an innovative treatment for plantar fasciitis. It covers the science behind laser therapy, detailing how it promotes tissue repair and reduces inflammation. Readers will find practical guidance on treatment protocols and patient case studies illustrating successful outcomes.

2. The LRAD Approach to Managing Plantar Fasciitis Pain

Focused on the application of LRAD (Low Reactive Acoustic Device) technology, this book presents a comprehensive overview of how sound waves can alleviate plantar fasciitis pain. It discusses the mechanism of action, clinical evidence, and step-by-step treatment procedures. Ideal for clinicians and patients interested in non-invasive pain relief options.

3. Advanced Laser and Acoustic Therapies for Plantar Fasciitis

This text combines insights on laser and acoustic therapies, including LRAD, for treating plantar fasciitis. It reviews the latest research findings, compares different modalities, and offers practical advice for integrating these technologies into rehabilitation plans. The book also highlights patient experiences and outcomes.

4. Plantar Fasciitis Relief: Innovative LRAD Techniques

Dedicated to LRAD-specific techniques, this book guides readers through the application of acoustic devices in plantar fasciitis treatment. It includes detailed protocols, device selection tips, and troubleshooting advice. The book is suitable for healthcare providers seeking to expand their therapeutic toolkit.

5. Non-Invasive Treatments for Plantar Fasciitis: The Role of LRAD

This book emphasizes non-invasive treatment methods, with a strong focus on LRAD technology. It discusses the advantages of acoustic therapy over traditional treatments and provides evidence-based recommendations. Patients and practitioners alike will benefit from its clear explanations and practical guidance.

6. Clinical Applications of LRAD in Foot and Ankle Disorders

Offering a broader perspective, this book covers LRAD use in various foot and ankle conditions, including plantar fasciitis. It presents clinical protocols, case reports, and outcome analyses to demonstrate the efficacy of LRAD. The book serves as a valuable resource for podiatrists and physiotherapists.

7. Integrating LRAD Therapy into Plantar Fasciitis Rehabilitation

This guide focuses on incorporating LRAD therapy into comprehensive rehabilitation programs for plantar fasciitis. It discusses combining acoustic therapy with stretching, strengthening, and other modalities. The book provides practical tips for optimizing treatment effectiveness and patient compliance.

8. Understanding Plantar Fasciitis and the Impact of LRAD Treatment

Providing foundational knowledge on plantar fasciitis, this book also delves into how LRAD treatment modifies the disease process. It explains the pathology of plantar fasciitis and how acoustic waves aid in healing. The text is accessible to both medical professionals and patients seeking to understand treatment options.

9. Innovations in Plantar Fasciitis Therapy: The LRAD Revolution

Highlighting cutting-edge advancements, this book showcases how LRAD

technology is revolutionizing plantar fasciitis therapy. It includes interviews with experts, summaries of recent clinical trials, and future directions for research. Readers will gain insight into the evolving landscape of foot pain management.

Lrad For Plantar Fasciitis

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lrad for plantar fasciitis: Real Help For Plantar Fasciitis Dr. Pete Moncado, DC, 2020-09-18
Do your feet hurt and you don't know why? Do you have issues with your shoes that cause your feet to hurt at the end of the day? Have you given up running or wearing high heels, or had to cut back on your favorite sport?

 If you've tried everything but still have pain from plantar fasciitis—inflammation of the tissue that runs across the bottom of your foot and connects your heel bone to your toes—this book will show you how to find relief without simply masking the pain. Real Help For Plantar Fasciitis contains a wealth of information to minimize your suffering with sound, proven solutions.

 Get real help for plantar fasciitis today!

lrad for plantar fasciitis: Resolving Plantar Fasciitis - a Roadmap to Success Brian James Abelson, Kamali Thara Abelson, 2015-03-16 Resolving Plantar Fasciitis - A Roadmap to Success
===== Have you been suffering due to excruciating pain in the bottom of your foot? Are you missing out on your active-living lifestyle because of the pain? This easy-to-read book helps you to understand the true causes of Plantar Fasciitis, its impact on the other structures of your body (your kinetic chain), and provides simple, non-invasive, and effective tools for eliminating your problem. Unlike most programs which focus on just your feet, you will learn to look at your body as a dynamic web of interconnected links - the Kinetic Web. You may discover that your Plantar Fasciitis case is caused by injuries and restrictions in other, distant parts of your body. You will learn how to find these problem areas, and then truly resolve your Plantar Fasciitis for the long-term by building your own unique, individualized routine of myofascial releases, stretches, and strengthening exercises to address your specific issues. So get back to your active, pain-free lifestyle, and get rid of that pain in the bottom of your feet. ===== In This Book ===== Here is a quick overview of just the top level headings in our Table of Contents.

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Self-Evaluation Process Recording your Functional Test Results Functional Tests for: -Joint Mobility -Legs and Hips -Functionality -Optional Tests Chapter 7: Phase 2: Addressing Problems in the PF Kinetic Chain Start with a Condensed Foundational Protocol Addressing Kinetic Chain Issues for PF Build Your Kinetic Chain Routine for PF Chapter 8: Why Exercise is Essential The Importance of -Stretching & Myofascial Release -Strengthening Exercises -Nerve Flossing Exercises -Aerobic Warm-ups -Involving Your Core Chapter 9: Stretching & Myofascial Release Exercises for PF Scheduling Your Workout The Foundational Foot Flexibility and Myofascial Release Protocols Shin Flexibility and Myofascial Release Routine Calf Flexibility and Myofascial Release Routine Stretching the Hip Flexors Increasing Joint Mobility Nerve Flossing for Plantar Fasciitis Chapter 10: Strengthening Exercises for PF Foundational Strengthening Routine for PF Lower Extremity Strengthening Exercises Hip Strengthening Exercises Core Stabilization Exercises And MUCH MORE!

Irad for plantar fasciitis: *Plantar Fasciitis Has the Wrong Name* Kevin Morgan, 2018-08-19 Everything in your body is connected. Look to your hips for the source of your heel pain! Dozens of treatments, some expensive, some dangerous? Suspicious? This book explains the cause, and describes the progression of this disease, if you fail to cure it in it's earliest stages - notably acute heel pain on getting out of bed, running, or due to some unknown reason. A detailed treatment strategy is provided. The product of eight years of scientific enquiry, this work demonstrates that a better name for so-called plantar fasciitis is nociceptive foot pain (NFP). The primary issues are non-inflammatory, and they arise elsewhere than the plantar fascia, frequently involving in the hips. A logical treatment strategy is presented, along with the story of the research journey that created this effective treatment approach. This method is already helping runners and non-runners to cure their acute morning heel pain. Tom was in his favorite running store, trying on a pair of zero-rise, large-toe-box running shoes. He was also quizzing fellow athletes and staff about whether they'd suffered from plantar fasciitis. JEFF'S STORY Jeff, who'd served Tom several times before, said, I've been a runner all my life. I had plantar fasciitis once. It was a few years ago. Running's in my blood, I guess. I was having a great season, when I suddenly developed a horrible heel pain. It was worst on getting out of bed in the morning and when I ran. It really messed up my run. I'd end up hobbling within a few miles. The sports doc said I had plantar fasciitis. I tried lots of treatments, but nothing worked. I'd already signed up for a 100-mile run, and was pretty excited about it, but the foot pain was crippling me. I thought, to hell with it, I'll do the run anyway. So I did! Yes! I was nervous. I set off, and had a horrible time for the first 60 miles. My heel hurt but I pushed through it. Long-distance running involves plenty of pain, either way. Then, surprise, surprise. Around mile 60, my heel pain vanished. I just noticed that it wasn't there anymore. That was several years ago, and I haven't had heel pain since! * * * Based on this story, you might be tempted to run - or walk - through your own pain. Not so fast. Read on. * * * ANNE'S STORY It was the first day of a triathlon training camp, and about fifteen athletes, including Tom, were sitting in a circle. Dave, the head coach, said, I'd like each of you to tell your most severe training injury story. Let's see what we can learn. I learned that you should hang onto the bike when you're hit by an SUV! Dave was in a wheelchair, recovering from a serious bike wreck - a constant hazard when training on the road. Anne, a tall blond, about 25, slim, very fit, and shy, was clearly an excellent athlete. I was training for an important race, when I developed a horrible heel pain in both feet. Anne said. It was really bad in the morning, but it never went away all day. A sports doc said I had plantar fasciitis, and recommended that I stop running for a while. He said there was a risk of seriously injuring my plantar fascia. But I continued my training anyway. You know how it is! I was doing a steady 10-mile out and back in our neighborhood, when both plantar fascias ripped in half. I collapsed in unimaginable pain, and my neighbor found me and carted me off to the hospital. The same sports doc came to see me, but he didn't say I told you so! He's a good doctor, and I trust him. I ended up having surgery to repair my feet. With intense physical therapy, it took me over a year to walk normally, and another year to start running. I'm finally back, but I'll never do that again. * * * Tom thought, It can progress to involve the plantar fascia, but only in extreme cases. Then he wondered,

How did Jeff fix his heel pain by running, and Anne tore up her feet doing essentially the same thing? Running through the pain. This doesn't sound like inflammation.

Irada for plantar fasciitis: Low-Dose Radiotherapy of Painful Heel Spur/Plantar Fasciitis as an Example of Treatment Effects in Benign Diseases Robert Michael Hermann, 2017

Degenerative changes in the plantar fascia may cause the so-called painful heel with typical projections of tenderness. This condition is often associated with a plantar heel spur. Radiotherapy with low doses (LD-EBRT) has been well known for its anti-inflammatory potential. In the recent years, several microbiological mechanisms were elucidated to explain immunomodulation by LD-EBRT. Furthermore, a randomized study proved the clinical efficacy of this therapy in plantar fasciitis. Two other trials defined a fractionation schedule of 6×0.5 Gy twice weekly as the new standard therapy. Taken together, LD-EBRT is an effective and safe therapeutic option for patients over 30 years of age and after exclusion of pregnancy. In case of an insufficient response, a second course can be offered to the patient. There are still open questions concerning target volume definition and fractionation of LD-EBRT. Furthermore, studies randomizing LD-EBRT with other conservative therapeutic approaches are missing.

Irada for plantar fasciitis: Injury Afoot Patrick Hafner, 2015-01-02 This book contains your 30-point action plan to overcome plantar fasciitis. The information within will save you the time of hunting down and deciphering sometimes conflicting advice, and save you money by avoiding futile and often dangerous treatments. Use the steps found here to conquer plantar fasciitis and get back on your feet.--Back cover

Irada for plantar fasciitis: The Plantar Fasciitis Cure Brad Senska, 2013-01-01

Irada for plantar fasciitis: The Foot Fix Yamuna Zake, 2021-01-12 This book will empower you to get your feet functioning as they should do, without any medical intervention. Includes a 4-week plan of quick-and-easy exercises to get your feet back into shape, plus solutions for specific foot issues, from plantar fasciitis to fallen arches. This is a uniquely helpful and accessible guide to taking control of your own foot health by holistic health innovator Yamuna Zake. We don't need doctors, orthotics or even surgery to relieve common foot problems, such as plantar fasciitis, bunions, neuromas, arthritis, hammertoes, and flat feet. By learning a correct gait that uses the entire foot to distribute weight, we can relieve and prevent common foot problems without any medical intervention. The book offers an easy-to-follow 4-week program of routines that take just 15 minutes a day during the program and allows readers to fix their feet and take ownership of their body. Each of the four weeks focuses on a different part of the foot: the heel, the arch, the ball and the toes. There are 3-4 exercises in each section and readers try them all and can choose to focus on those exercises in each section that they enjoy most. This programme is then supported with mindful foot practices to ensure bad habits don't return. Six common foot problems are also explored, including their causes (specific incorrect walking patterns) and ways of preventing and relieving them (exercises plus mindful practices). You won't find any medical concepts or terminology in this book, nor do you need to learn complicated foot anatomy. The whole program is based on what you already know: walking. You'll learn how to walk and stand correctly and to use every part of your feet as nature intended. That's all you need to do!

Irada for plantar fasciitis: The 5-Minute Plantar Fasciitis Solution Jim Johnson, 2008 The 5-Minute Plantar Fasciitis Solution is a simple and quick do-it-yourself program that will help you recover from one of mankind's most common and annoying foot problems- plantar fasciitis. Drawing from the latest scientific research, The 5-Minute Plantar Fasciitis Solution details in plain language what plantar fasciitis is, how to eliminate it, and the things you can do to prevent it from ever coming back again. And the best part? It has been proven in randomized controlled trials to work on long-term plantar fasciitis sufferers-taking only minutes a day to do Jim Johnson, P.T. is a physical therapist who has spent over sixteen years treating both inpatients and outpatients with a wide range of pain and mobility problems. He has written many books based completely on published research and controlled trials including The Multifidus Back Pain Solution, Treat Your Own Knees, The No-Beach, No-Zone, No-Nonsense Weight Loss Plan: A Pocket Guide to What Works, The

Sixty-Second Motivator, and Treat Your Own Rotator Cuff. His books have been translated into other languages and thousands of copies have been sold worldwide. Besides working full-time as a clinician in a large teaching hospital and writing books, Jim Johnson is a certified Clinical Instructor by the American Physical Therapy Association and enjoys teaching physical therapy students from all over the United States.

Irada for plantar fasciitis: Managing and Treating Common Foot and Ankle Problems, An Issue of Medical Clinics, E-Book John DiPreta, 2014-03-28 This issue of Medical Clinics will focus on the common foot and ankle problems that internal medicine doctors often face in the outpatient setting. The articles in this issue will review best practices for managing and treating patients who present with such common injuries hammertoes, ankle sprains, plantar fasciitis, and Achilles tendon strains.

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Irada for plantar fasciitis: Effective Physical Therapy Interventions in the Treatment of Plantar Fasciitis Julie Ambrosy, 2010 Introduction: Plantar fasciitis is the most common cause of heel pain reported in the literature today. The purpose of this literature review is to determine the most effective physical therapy intervention(s) for the treatment of plantar fasciitis. Methods: The literature review included a computerized search of electronic databases, author and citation tracking of relevant studies and hand searching journals. Electronic databases searched include ScienceDirect, PubMed Central, Google Scholar, SpringerLink and PubMed. Search terms included, etiology, plantar fasciitis, manual therapy, pathophysiology, effective treatment, physical therapy, chronic plantar fasciitis, modalities, iontophoresis, laser, electrical stimulation, therapeutic ultrasound, night splinting, taping and manipulation. Results: 35 (1991-2009) of 326 articles met our inclusion criteria; 34 studies utilize a group design, one is an N-of-1 single subject design. Discussion and Conclusion: There is inconclusive evidence to support the use of modalities, stretching, orthotics and taping as treatments for plantar fasciitis. There is evidence to support the use of night splinting. Additionally, further studies are needed to establish the effectiveness of joint mobilization and Extracorporeal Shockwave Therapy (ESWT) as conservative physical therapy interventions for adults with plantar fasciitis. -- Abstract.

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Irada for plantar fasciitis: The Ultimate Guide to Strong Healthy Feet William Errol Prowse IV, 2015-10-21 Chronic foot problems are pervasive in modern societies and people see them as a congenital or inherent part of being human. That is wrong! You can fix your feet and avoid future

problems with my step by step program. The program can reverse many foot disorders permanently.

Irada for plantar fasciitis: A New Foot Health Solution Dennis Denlinger, G. B. Hensen, 2001

Irada for plantar fasciitis: Treated Methods Plantar Fasciitis Tish Vanlue, 2021-07-24 When the thick band of tissue runs along the bottom of your foot and this band connects the heel bone and toes then if it becomes inflamed, you'll feel pain in the heel. Typically, this pain is strongest after prolonged periods without placing weight on the feet, such as when you first wake in the morning. Following the author's clinically proven methods to get rid of pain fast and without surgery. Find out: - A detailed explanation of treatments - A description of plantar fasciitis - A compilation of treatment methods that are known to work. - A brief description of the author's own highly successful clinical strategy which has been proven to be effective again and again.

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Irada for plantar fasciitis: Posterior and Plantar Heel Pain, an Issue of Clinics in Podiatric Medicine and Surgery, Volume 38-2 Eric A. Barp, 2021-04-28 Guest edited by Dr. Eric Barp, this issue of Clinics in Podiatric Medicine and Surgery will cover several key areas of interest related to Posterior and plantar heel pain. This issue is one of four selected each year by our series Consulting Editor, Dr. Thomas Chang. Articles in this issue include but are not limited to: Tarsal Tunnel Syndrome, Compartment syndrome, Differentiating Achilles Insertional Calcific Tendinosis and Haglund's Deformity, Complications, Plantar Fasciitis/Fasciosis, Achilles Tendon Ruptures, Calcaneal bone tumors, Biologics in the Treatment of achilles tendonitis, Biologics in the treatment of plantar fasciitis, Neglected Achilles tendon ruptures, and Os Trigonum Syndrome.

lrad for plantar fasciitis: *Killing Heel Pain* Karen L. Smith (Podiatrist), 2017

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