THE STUBBORN HEEL PAIN: A CASE REPORT

Mohd Yusoff Yahaya[1], Mohamed Faizal Sikandar[1], Mohd Fairudz Mohd Miswan[1], Haszianaliza Haslan[1]

[1]Universiti Teknologi MARA

Introduction: Plantar Heel pain is a common complaint of patients with plantar fasciopathy usually being the diagnosis. This is true in majority of the cases, but other differentials must also be considered. Inferior calcaneal nerve (ICN) entrapment or "Baxter Neuropathy" is the culprit in 20%of chronic heel pain. Various treatment options are available such as shock wave therapy, steroid injection, platelet rich plasma (PRP), and surgery. We are reporting a case of recalcitrant heel pain successfully managed via surgical release of ICN.

Discussion: A 50-year-old female, presented with right plantar heel pain for 2 years. She was prescribed orthosis, then steroid injection, multiple PRP injections and neuroablation therapy. All provided only temporary relief. She described pricking pain over medial calcaneal tuberosity (MCT) and radiated to lateral aspect. Upon palpation there was tenderness at the MCT and positive Tinnel test. She was also unable to abduct her little toe. These findings led us to possibility of entrapment neuropathy. X-ray revealed calcaneal spur. Ultrasound showed thickening of plantar fascia. Subsequently, MRI was done which identified fatty athropic of abductor digiti minimi. These findings suggestive of ICN neuropathy. Option of surgical release was offered. The surgery was done under regional anesthesia. The first and second point of ICN entrapment was released with partial fasciectomy done. Complete resolution of symptom observed at 4 months.

Conclusion: ICN neuropathy can masquerade or coexist with plantar fasciopathy. Thickening of plantar fascia will lead to ICN neuropathy as it narrows down the path of ICN. As in our case, she has exhausted all the available treatments. The decision for open release, therefore, becomes an option. We are highlighting this case as ICN neuropathy continue to slip under the radar despite being notorious to cause plantar heel pain. We believe surgical release is a reliable option after all option fails.