



From Practice - For Practice

Calcaneal Spur

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Calcaneal spur on the heel denotes a spiky, bony protrusion on one or both sides, on the underside of the Tuber calcanei in the area where tendons and fasciæ insert.

Depending on the localisation of the change in the bone, we distinguish between two forms: the more common lower calcaneal spur, which occurs on the underside of the heel-bone where the minor muscles of the foot insert, and the less common upper calcaneal spur, known as Haglund's

heel (after an orthopædic surgeon from Stockholm), where the Achilles' tendon inserts. Both forms originate because of excessive demands on, and microscopic injuries to, the insertions of tendons into the heel-bone, but may also occur in connection with inflammations (e.g. rheumatism).

Causative co-factors include overweight, overloading as a result of standing for long periods, intensive sports or incorrect posture of the foot (planovalgus foot), increasing age and ill-fitting

shoes. Those affected complain of dull or stabbing pains, which are present both when weight-bearing and when lying. The typical clinical symptoms enable a rapid diagnosis, which is firmed up by the appropriate palpation (circumscribed pain on pressure where tendons insert on the sole of the foot) and an X-ray.

Differential diagnosis is to exclude rheumatism, ankylosing spondylitis, gout and other illnesses of the synovial bursæ and bones in this area.

Treatment

First of all the footwear must be adapted, e.g. heel cushion, regulation of the heels/height of the heels; raw places must be covered with plasters. Above all, orthopædic (possibly chiropractic) measures are important to release tension in the calf muscles and relieve pain in the soft tissues.

In non-serious cases almost the only treatment that is needed is an appropriate change of diet, to exclude cow's milk and pork products.

- 1) 1-3 times daily, massage the heel and calf muscles with SANUVIS 1X or MUCOKEHL 3X ointment, to relieve the tissues. Every day a warm foot-bath lasting at least 20-30 minutes, with 1 measuring-spoonful of ALKALAN powder, or apply a foot bandage overnight soaked in an aqueous solution of ALKALAN powder (1/2 - 1 measuring-spoonful of powder in a glass of water). Additionally CITROKEHL, 10 drops 3 times a day, to be taken over several weeks.
- 2) At the same time, begin with NOTAKEHL 5X tablets, 1 twice a day, for 2-3 weeks (against epicondylitis and problems with the joints). Then switch from NOTAKEHL to:
- 3) from Monday to Friday MUCOKEHL 5X tablets, 1 in the mornings, and NIGERSAN 5X tablets, 1 each midday and evening; on Saturdays/Sundays NOTAKEHL 5X, 1 tablet twice a day; maintain this alternation for several weeks or months.
- 4) At the same time as stage 3, we prescribe LATENSIN 6X, 5 drops twice a day.

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