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Chockwave therapy is increasingly used for plantar fasciitis, but limited evidence supports its use. In spite of plantar heel pair Deing so common in the population, a growing body of evidence indicates that various methods and modalities applied by physiotherapists to relieve the symptoms of plantar heel pain lack quality validating research and is, therefore, not evidence based. e purposes of this study are to determine the clinical e ectiveness of shock wave in the treatment of chronic patient with plantar heel pain in term of pain intensity and function level, to measure any changes in pain level before and immediately a er the treatment and to compare the e ectiveness of shock wave therapy with other regular modalities in physiotherapy. A randomized controlled trial with 90 patients with plantar heel pain were selected from the general public in the same order that they presented in the Physiotherapy Department at Ahmed Ali Kanoo Health Center. Patients were randomly assigned into 3 groups: Group A-Shockwave therapy group-using Piezoson 100 at each session, 2000 shots (0.12-.051 mJ/mm2, 50 Hz) shock waves and exercise Group B- Conservative treatment group-includes wax therapy and exercise and Group C-routine ca with exercise only. e Foot and Ankle Ability Measure (FAAM) were used to measure function and e Visual Analogue Scale (VAS) to measure pain intensity. Results show that the pain intensity data group A (shock wave and exercise) was no immedia reduction. e mean value of pain intensity was calculated as 7/10 pre-intervention. e mean value of pain intensity was calculated as 3.3/10 post intervention. Pain intensity data for group B (wax and exercise) was no change in pain within the same session. e mean value of pain intensity was calculated as 6.5/10 pre-intervention. e mean value of pain intensity was calculated as 5.2/10 post intervention. Pain intensity data for group C (Exercise only) was an immediate reduction, but not lasting for next session. e mean value of pain intensity was calculated as 6.3/10 pre-intervention. e mean value of pain