



PATIENT EDUCATION

Plantar fasciitis & low-dose radiation

A plain-language guide for patients and families. Bring this to your visit. It does not replace advice from your clinician.

What is plantar fasciitis?

Plantar fasciitis is irritation of the thick band of tissue (plantar fascia) that supports the arch and connects the heel to the toes. It causes heel pain — often worst with the first steps in the morning or after sitting. It is very common and usually not related to a heel spur alone. It is not cancer.

What you may notice

- Sharp or aching heel pain with first morning steps
- Pain after long standing, walking, or hard floors
- Tenderness under the heel or along the arch
- Stiffness that eases somewhat after warming up, then returns with overuse

Usual care options

Most people improve with relative rest, calf/plantar stretching, supportive shoes or orthotics, ice, weight management when relevant, physical therapy, and sometimes injections or procedures. **Low-dose radiation** may be considered for selected chronic cases that have not improved after standard conservative care.

Where CureRays may fit. For selected patients with persistent heel pain from plantar fasciitis (or related degenerative heel pain), CureRays may offer **low-dose image-guided / DEEP-SRT™** aimed at calming local inflammation — similar in spirit to low-dose joint radiation for arthritis. Your team confirms the diagnosis and that simpler measures have been tried.

What treatment usually involves

- Confirmation that pain is plantar-fascia related (and not another heel problem)
- A short series of outpatient sessions — each typically brief
- Positioning of the foot; immobilization supports accuracy
- No surgery and no surgical scar; same-day return to paced activity as advised
- Continued stretching, footwear, and therapy as recommended

Keep doing the basics

Radiation is an add-on for selected stubborn cases, not a replacement for footwear, stretching, and load management. Plan to continue those measures during and after the course so gains can last.



Side effects you should know about

Low-dose heel radiation uses a small fraction of cancer treatment doses. Plan for:

- **Fatigue.** Mild tiredness can occur; pacing helps.
- **Possible flare.** Temporary increase in heel pain for a few days can occur; use ice, stretching as allowed, and approved pain medicine.
- **Skin.** Mild redness or warmth over the field can occur and usually fades.
- **Rare / serious.** Fever, rapidly worsening one-sided swelling, or calf pain with swelling need urgent care.

Evidence in plain words

Low-dose radiation for chronic plantar fasciitis has been studied, including randomized and observational work suggesting possible function/pain benefit in selected patients after conservative care fails. Study results are mixed on some measures. We do **not** invent a personal success percentage — your clinician will describe expected benefit for your heel and prior treatments.

What this means for you at CureRays

If first-line care has not controlled your heel pain, low-dose radiation may be one additional option. CureRays will explain immobilization, side-effect plans, and how we will measure improvement.

Questions to ask

- Have we ruled out stress fracture, nerve entrapment, or other heel causes?
- Which conservative steps should I continue during radiation?
- How many sessions are planned, and when might I notice change?
- What should I do if I get a temporary pain flare after treatments?

How to schedule or learn more

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Learn more: www.curerays.com/arthritis

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