Although most heel pain in children occurs when their feet are growing and developing (ages 6 to 14), the more children participate in year around competitive sports, they increase their risk for growth-plate injuries and subsequent heel pain.

The following is a sample of the more common injuries seen in children that present with heel pain.

**Bursitis and tendonitis:** Tendo-Achilles bursitis occurs when the sac between the Achilles tendon and the heel bone becomes inflamed due to an injury, possible onset of juvenile rheumatoid arthritis, or from wearing shoes with poorly cushioned heels. Tendonitis is an overuse injury occurring mainly in adolescents over 14 in which the Achilles is stressed and inflamed from repeated running and pounding.

**Fractures:** Sometimes hairline or stress fractures result from repeated pressure on the heel bone and can occur in adolescents involved in competitive sports. Small children also get heel fractures from jumping off furniture or stairs.

Depending on the severity of the child’s heel pain, treatments range from simply reducing physical activity to surgery. In most cases, mild to moderate heel pain can be treated successfully with shoe inserts to soften the impact on the heel, anti-inflammatory medications, stretching and physical therapy. In severe cases, the foot and ankle will be immobilized in a cast and in some instances, surgery might be necessary to lengthen the Achilles tendon or correct another problem.

Although pediatric heel pain can return after treatment (the growth plate continues to form until the age of 14 or 15), the risk for recurrence can be lowered by choosing well-constructed shoes with good support.

Restricting use of spiked athletic shoes, especially on hard fields, and instructing kids to not try to run or play with pain is strongly advised. It also is advised that young athletes avoid competition that exceeds their physical abilities.