

# Differential diagnosis of lesions at the heel and ankle



	Disorder	Diagnosis	Treatment
<b>Posterior pain</b>	Achilles tendinitis	Pain during rising on tiptoe Differentiate 4 types by palpating insertion, localizing sign and passive plantiflexion	Deep transverse friction Alternative: triamcinolone
	Achilles tenovaginitis	Discrepancy between symptoms and signs Warm, swollen and tender to the touch	Medication Triamcinolone
	Subachilles bursitis	Painful passive plantiflexion	Triamcinolone
	Dancer's heel	Painful passive plantiflexion Some laxity of plantiflexion movement	Triamcinolone
	Os trigonum periostitis	Painful passive plantiflexion Limitation of plantiflexion (Painful resisted flexion of big toe)	Triamcinolone Surgery
	Subcutaneous bursa	Normal examination Painful palpation	Triamcinolone Better shoes Surgery
	Subcutaneous nodules	Normal examination Palpation of small, hard, tender nodules	Subcutaneous tenotomy
	Plantar fasciitis	Typical history and localization Normal functional examination Painful palpation	Horizontal, raised heel Triamcinolone
	Painful heel pad	Typical history Normal functional examination Painful palpation	Procaine
	Sprain of posterior talofibular ligament	Passive plantiflexion and eversion hurts at the outer posterior side	Triamcinolone
	Tendinitis of tibialis posterior	Painful resisted inversion and resisted plantiflexion Localization behind the medial malleolus	Deep transverse friction
	Calcaneal apophysitis	Boys aged 12–16 years Intermittent pain Normal functional examination	Rest

	<b>Disorder</b>	<b>Diagnosis</b>	<b>Treatment</b>
<b>Lateral pain</b>	Peroneal tendinitis	Painful passive inversion Painful resisted eversion	Deep friction Alternative: triamcinolone
	Mucocele of peroneal tendons	Painful passive inversion Painful resisted eversion Palpable, fluctuating swelling	Aspiration Triamcinolone
	Snapping ankle	Same as peroneal tendinitis Palpation of moving tendon during plantiflexion–dorsiflexion	Surgery?
	Jumper's sprain	Typical history Normal functional examination Additional test: valgus during dorsiflexion	Triamcinolone Prevention
	Chronic adhesions of lateral ligament	History of varus sprain Painful inversion Changed end-feel	Manipulation
	Sprain of posterior talofibular ligament	Passive eversion and plantiflexion cause pain at the posterolateral side	Triamcinolone
	Ankle instability (lateral ligament)	History of varus sprain and fear of the ankle 'giving way' Laxity during passive inversion Positive anterior drawer sign	Wobble board training Surgery
<b>Anterior pain</b>	Sprain of the anterior tibiotalar ligament Anterior periostitis	Previous plantar sprain? Painful passive plantiflexion Painful passive dorsiflexion	Deep friction Triamcinolone
	Tenosynovitis of the extensors of the toes	Painful passive plantiflexion Painful resisted dorsiflexion of the toes Crepitus/fluid	Deep friction Triamcinolone
	<b>Medial pain</b>	Tendinitis of tibialis posterior	Painful resisted plantiflexion and resisted inversion
Tendinitis of flexor hallucis longus		Painful resisted plantiflexion and resisted inversion Painful resisted flexion of the big toe	Triamcinolone Deep friction
Sprain of deltoid ligament		Painful passive eversion and plantiflexion	Triamcinolone and support
<b>Pain in the ankle</b>	Unstable mortice	Pain and click during strong varus	Sclerosing injection Surgery
	Psoriatic arthritis of the ankle joint	Capsular pattern Warmth Fluid	Triamcinolone
	Haemarthrosis of the ankle	Trauma Nocturnal pain Capsular pattern Tender	Aspiration
	Osteoarthrosis of the ankle	Capsular pattern Hard end-feel Crepitus	Arthrodesis

	<b>Disorder</b>	<b>Diagnosis</b>	<b>Treatment</b>
<b>Pain in the ankle</b>	Immobilizational stiffness of the ankle	After immobilization Limitation of flexion and extension	Mobilization
	Loose body in the ankle joint	Twinges (during walking downstairs) Normal clinical examination	Manipulation Root's shoe
	Immobilizational stiffness of subtalar joint	Immobilization Marked limitation of varus and valgus No muscle spasm	Mobilization
	Osteoarthrosis at the subtalar joint	After a fracture Limitation of varus Hard end-feel	Arthrodesis
	Loose body in the subtalar joint	Twinges Fixation in valgus or full range of movement	Manipulation
	Subacute traumatic subtalar arthritis	Previous sprain or foot injury Limitation of varus by muscle spasm	Triamcinolone Immobilization
	Monoarticular subtalar arthritis	No injury Capsular pattern and muscle spasm Joint is warm, swollen and tender	Triamcinolone
	Psychogenic pain	Fixation of the subtalar joint in varus	