

PEARLS Practical Evidence About Real Life Situations

Custom-made insoles can reduce foot pain

Clinical question	How effective are custom-made orthoses for different types of foot pain?
Bottom line	Custom-made orthoses (insoles moulded to a cast of the foot) were effective for painful pes cavus (NNT* 5), rear foot pain in rheumatoid arthritis (NNT 4), foot pain in juvenile idiopathic arthritis (NNT 3), and for painful hallux valgus (NNT 6). However, surgery was even more effective for hallux valgus, and non-customised foot orthoses appeared just as effective for juvenile idiopathic arthritis but the analysis may have lacked sufficient power to detect a difference in effect. It is unclear whether custom-made insoles were effective for plantar fasciitis or metatarsophalangeal joint pain in rheumatoid arthritis. *NNT = number needed to treat to benefit one individual.
Caveat	Comparisons to custom-made insoles included sham orthoses, no interventions, standardised interventions given to all participants, non-customised (prefabricated) foot orthoses, combined manipulation, mobilisation or stretching, night splints and surgery. Follow-up ranged from one week to 3 years. The vast majority of analyses contained data from only one trial.
Context	Foot pain has been reported to have a prevalence of 24 per cent for women and 20 per cent for men aged 18 to 80 years.1 Foot pain may be experienced following an injury, long term overuse, infection or systemic disease involving any tissue of the foot, including bones, joints, ligaments, muscles, tendons, nerves, skin and nails. Foot orthoses are commonly recommended for the treatment of foot pain.
Cochrane Systematic	Hawke F et al. Custom-made foot orthoses for the treatment of foot pain. Cochrane Reviews 2008,

PEARLS are succinct summaries of Cochrane Systematic Reviews for primary care practitioners. They are funded by the New Zealand Guidelines Group.

PEARLS provide guidance on whether a treatment is effective or ineffective. PEARLS are prepared as an educational resource and do not replace clinician judgement in the management of individual cases.

View PEARLS online at:



PEARLS

Practical Evidence About Real Life Situations

Review Issue 3. Article No. CD006801. DOI:

10.1002/14651858. CD006801.pub2. This review

contains 11 studies involving 1332 participants.

PEARLS 102, October 2008, written by Brian R McAvoy

[References]

1. Garrow AP et al. Pain 2004;110: 378-384.



PRIMARY HEALTH CARE FIELD

PEARLS are succinct summaries of Cochrane Systematic Reviews for primary care practitioners. They are funded by the New Zealand Guidelines Group.

PEARLS provide guidance on whether a treatment is effective or ineffective. PEARLS are prepared as an educational resource and do not replace clinician judgement in the management of individual cases.

View PEARLS online at:

www.cochraneprimarycare.org