



Achilles Tendinopathy (Tendonitis)

WHAT IS ACHILLES TENDINOPATHY?

Achilles tendinopathy is a condition that causes pain, swelling, stiffness and weakness of the Achilles tendon that joins your heel bone to your calf muscles. It is thought to be caused by repeated tiny injuries to the Achilles tendon. These may occur for a number of reasons, including overuse of the tendon - for example, in runners. Treatment includes rest, ice packs, painkillers and special exercises to help to stretch and strengthen the Achilles tendon. For most people, the symptoms of Achilles tendinopathy usually clear within 3-6 months of starting treatment.

WHAT ARE THE SYMPTOMS?

The main symptoms include pain and stiffness around the affected Achilles tendon. Pain and stiffness tend to develop gradually and are usually worse when you first wake up in the morning. (Severe pain that comes on suddenly and difficulty walking can be symptoms of Achilles tendon rupture. See a doctor urgently if you develop these symptoms.)

Some people have pain during exercise but, in general, pain is worse after exercise. Runners may notice pain at the beginning of their run, which then tends to ease and become more bearable, followed by an increase in pain when they have stopped running. Pain due to Achilles tendinopathy may actually prevent you from being able to carry out your usual everyday activities such as walking to the shops, etc. You may notice that you have pain when you touch the area around your Achilles tendon. There may also be some swelling around this area.

WHY DID I GET IT?

- There are a number of things that may lead to these repeated tiny injuries to the Achilles tendon. For example:
- Overuse of the Achilles tendon. This can be a problem for people who run regularly. (Achilles tendinopathy can also be a problem for dancers and for people who play a lot of tennis or other sports that involve jumping.)
- Training or exercising wearing inappropriate footwear.
- Having poor training or exercising techniques - for example, a poor running technique.
- Making a change to your training programme - for example, increasing the intensity of your training and how often you train.
- Training or exercising on hard or sloped surfaces.
- Having a high-arched foot.
- Having poor flexibility - for example, having tight or underdeveloped thigh (hamstring) muscles.
- Achilles tendinopathy is also more common in people who have certain types of arthritis, such as ankylosing spondylitis or psoriatic arthritis. It is also thought that your genetic 'makeup' (the material inherited from your parents which controls various aspects of your body) may play a part for some people who develop Achilles tendinopathy.
- People who are taking medicines from a group called fluoroquinolones (eg, the antibiotics **ciprofloxacin** and **ofloxacin**) for long periods also have an increased risk of developing Achilles tendinopathy.

Information for Patients:

ARE THERE ANY COMPLICATIONS OF ACHILLES TENDINOPATHY?

There is a risk of rupturing your Achilles tendon if you have Achilles tendinopathy. This is because the tendon is damaged and weaker than usual. However, this risk is usually quite low. Severe pain around the Achilles tendon that develops suddenly may be a sign of tendon rupture. See a doctor urgently if you think that you may have ruptured your Achilles tendon.

HOW CAN I TREAT MY ACHILLES TENDINOPATHY?

There are a number of treatments that may help. The treatments below are usually suggested first. They are all considered as conservative treatments. This means treatments that do not involve surgery.

- **Rest:** from sporting activities is important if you have Achilles tendinopathy. At first, you should stop any high-impact activities or sports (such as running). As pain improves, you can restart exercise as your pain allows. It is thought that complete rest, if it is prolonged, can actually be worse for the injury. Be guided by your pain as whether you are attempting too much exercise.
- **Weight Loss:** Try to achieve a healthy body weight for your height. This will reduce the loading on the Achilles tendon.
- **Painkillers:** Paracetamol may help to relieve pain. Using 10% ibuprofen gel to massage the tendon 3 times per day may also be helpful in managing painful symptoms but use the gel for up to two weeks only as this type of medication can affect tendon healing in the long term.
- **Ice packs** may be useful for pain control and may help to reduce swelling in the early stages of Achilles tendinopathy. An ice pack should be applied for 10-30 minutes. Less than 10 minutes has little effect. More than 30 minutes may damage the skin. Make an ice pack by wrapping ice cubes in a plastic bag or towel. (Do not put ice directly next to skin, as it may cause ice burn.) A bag of frozen peas is an alternative. Gently press the ice pack on to the injured part. The cold from the ice is thought to reduce blood flow to the damaged tendon. This may limit pain and inflammation. Do not leave ice on while asleep.
- **Achilles tendon exercises**
 - Some special exercises to help to stretch and strengthen your Achilles tendon can be helpful. You should aim to do these every day. Such exercises may help with pain control and stiffness. The following exercises can be used to help treat Achilles tendinopathy:
 - Stand about 40 cm away from a wall and put both hands on the wall at shoulder height, feet slightly apart, with one foot in front of the other. Bend your front knee but keep your back knee straight and lean in towards the wall to stretch. You should feel your calf muscle tighten. Keep this position for several seconds, then relax. Do this about 10 times and then switch to the other leg. Now repeat the same exercise for both legs but, this time, bring your back foot forward slightly so that your back knee is also slightly bent. Lean against the wall as before, keep the position, relax and then repeat 10 times before switching to the other leg. Repeat this routine twice a day.
 - Stand on both feet. Use your unaffected leg to raise up on to tiptoes. Transfer your weight across to your affected leg and lower yourself down. Repeat and aim for 3 sets of 15 repetitions twice each day. This exercise can be performed with your knees straight and then with your knees bent.

Information for Patients:

- Stand on the bottom step of some stairs (facing upstairs) with your legs slightly apart and with your heels just off the end of the step. Hold the stair rail for support. Lower your heels, keeping your knees straight. Again you should feel the stretch in your calves. Keep the position for 20-60 seconds, then relax. Repeat six times. Try to do this exercise twice a day.
- Keep a towel (or a long scarf) by the side of your bed. First thing in the morning, before you get out of bed, loop the towel around the ball of one of your feet. Then pull the towel towards you, keeping your knee straight. Hold the pull for about 30 seconds. This exercise will pull your toes and the upper part of your foot towards you. Repeat this exercise three times for each foot.
- Sit on a chair with your knees bent at right angles and your feet and heels flat on the floor. Lift your foot upwards, keeping your heel on the floor. Hold the position for a few seconds and then relax. Repeat about 10 times. Try to do this exercise five to six times a day.
- **Footwear/Heel Cushions/Heel Raise Pads:** Inserts to lift your heel may be useful to take some of the strain of the tendon. Wear heel lifts in both shoes to avoid making one side longer than the other. Gel heel cups can also help protect the back of the heel from rubbing on shoes and this may help to reduce pain and symptoms. Avoid shoes which rub on the tendon at the back of the heel or dig into the tendon at the back of the ankle.

WHAT HAPPENS NEXT?

For most people, the symptoms of Achilles tendinopathy usually clear within 3-6 months of starting conservative treatment, as described above. In the first instance you should give these treatments at least 12 weeks to have an effect and if you are noticing improvement, you should continue with them until the symptoms have resolved.

If in the future the same symptoms return, then restart the treatment above. Again, if the symptoms improve, continue until the symptoms resolve. If they do not improve then self-refer NHS Borders Podiatry Service using the online self-referral form or obtain a paper copy available from your local GP practice. Please ensure you complete the section on the form to let us know you have tried all the advice in this leaflet. Please note that although you will be seen by a physiotherapist for this problem after referral but it is important to send your referral to Podiatry **not** Physiotherapy.

Other information:

Shoes, Insoles, Taping, Gel products etc:

Wider Fit Shoes: www.widerfitshoes.co.uk Tel: 01933 311077

Algeos: <http://www.valleo.com/> Tel: 0151 280 5555

Simply Feet Tel: 0845 3700380 www.simplyfeet.co.uk

Heel Fix Kit: www.heelfixkit.com

Healthy Step: <http://www.healthystep.co.uk/heel-fix-kit/-/silicon-heel-cup/167?prod=11>

Health and Wellbeing Information:

NHS Inform: Tel: 0800 224488 <https://www.nhsinform.scot/injuries/muscle-bone-and-joint-injuries>

Information for Patients:

Health and Wellbeing advice/support www.smallchangesbigdifference.org Tel: 0800 224488

Walk It – (supported walking activity)

http://www.scotborders.gov.uk/info/1504/walking_cycling_and_horse_riding/311/walking_for_health Tel: 018350825060