

# Achilles Tendinopathy

## Education and advice to help patients manage their condition

This leaflet explains more about Achilles Tendinopathy. If you have any further questions, please speak to a staff member caring for you.

### What is a tendinopathy?

Tendinopathy is an overload of a tendon (the soft tissue that connects muscles to the bone), causing pain and inflammation and sometimes stiffness around the area affected.

The most common tendinopathy is of the Achilles tendon, which runs along the back of your heel and into your calf muscle.

Other common locations include the shoulder muscles (the rotator cuff), the knee (patellar tendon) and the hip (where the gluteal muscles attach to the thigh bone).



### What causes a tendinopathy?

Most commonly it is associated with a sudden increase of activity, but it can come on gradually with no clear cause. This is because many factors influence the condition. Examples of this include:

#### Things you can help change

- Increased weight or obesity
- Diabetes
- Reduced joint range of movement
- Foot alignment
- Training loads or different shoes
- Muscle strength

#### Things you are not able to change

- Use of steroids
- Previous tendinopathy
- Rheumatological disease
- Advancing age
- Recent injuries
- Gender

## How do I make my tendinopathy better?



Therapeutic exercises are the best treatment to target the muscle(s) affected. You will likely try a variety of different exercises before finding ones that work for you, because every tendinopathy responds differently.



Continuing to do what you enjoy is important, but only do what your tendinopathy can tolerate – this may mean walking or running less than you did previously, or only swimming a certain stroke in the pool.



The most important thing to work through is progressive reloading; gradually increasing the amount of activity you do so that your body has time to adjust, get stronger and can cope with the activities that previously brought you pain.

## How long will it take to get better?

It can take anywhere between three to twelve months to recover, so it is hard to predict for each individual. Timeframes depend on a variety of factors such as duration of symptoms and adherence to advice and exercises.

For most people, their symptoms will eventually resolve. Some people will have future flare ups, but these will be less often and better managed thanks to the knowledge and information given to them previously.



### Remember

Completing the prescribed exercises for at least three months is the key to getting better.

## Recommended Exercises

Doing exercises may be uncomfortable and you may experience some pain.

Start on the **Level 1 exercise**. If pain and ability allow, then progress to **Level 2** and **Level 3 exercises**.

*Top Tip: Hold onto a support such as the back of a chair.*

**Level 1 Exercise - repeat to three to four times, once per day.**



**Step 1**  
Standing on both feet  
to start



**Step 2**  
Come up onto your toes  
as high as you can. Hold this  
position for 20-30 seconds



**Step 3**  
Slowly lower the heels  
to the floor.

**Level 2 Exercise - repeat to fatigue, once every other day.**



**Step 1**  
Standing on both  
feet, come up onto  
your toes  
as high as you can.



**Step 2**  
Holding this position,  
slowly take the  
unaffected leg  
off the  
floor.



**Step 3**  
Slowly lower the heel  
of the affected leg  
to the floor.



**Step 4**  
Place the foot back  
on the floor to  
prepare to repeat  
from Step 1.

### Level 3 Exercise - repeat to fatigue, once every other day.



#### Step 1

Standing on both feet to start.



#### Step 2

Take the unaffected leg off the floor, so you are standing on your affected leg.



#### Step 3

Raise the heel off the floor as high as you can. Hold this for 2-3 seconds.



#### Step 4

Slowly lower the heel to be ready to repeat from Step 1.

### Is there anything other than exercise?

Taking a dose of anti-inflammatory medication can help some people, but this should be discussed with your GP beforehand.

For Achilles tendinopathy, insoles can also help to cushion hard shoes or support the foot in a better position.

Using ice can help to ease the pain and swelling. This can be done easily at home with a bag of peas wrapped in a tea towel.



Some people may be referred for Shockwave Therapy. Shockwaves are used to stimulate the healing response and reduce pain.

Shockwave Therapy does not work for everyone and is only given to people who cannot manage their pain with guidance.



There are no recommended surgeries, massage or other passive treatments for tendinopathies. As the tendon needs to be “re-trained” to tolerate exercise, it needs to practise this to improve.

## What if my pain gets worse?

Sometimes, certain exercises may be too intense and flare your pain. This does not mean you have damaged the tendon. Normally this is just a warning signal from your tendon to inform you that you've done more than it can tolerate and it wants to do less.

If this happens, don't panic. Reduce your exercise slightly, such as decreasing how many you do or how long you do it for. Whatever you do, don't stop completely as this can make the tendon stiffer and less tolerant to exercise when you restart.

## Things to remember

Therapists are there to support you - don't feel you have to know everything or have to work through this alone.

Be consistent – do your exercises regularly as guided and remember to give yourself appropriate amounts of rest as well.

Be patient – recovering from a tendinopathy takes time. But if you do it right the first time, you'll be much better prepared for self-managing in the future.

Stay healthy – exercising as able, sleeping and eating well, as well as being positive can all affect your pain levels and your general health.

## Useful sources of information

For more information regarding other causes of ankle/foot pain please visit The Chartered Society of Physiotherapy website <https://www.csp.org.uk/>

Find us on twitter @STGMSKPhysio

## Contact us

If you have any questions or concerns, please contact the Physiotherapy department on 020 8725 1422 (Monday to Friday, 8.30am to 4pm) or alternatively contact your GP.

**For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit [www.stgeorges.nhs.uk](http://www.stgeorges.nhs.uk)**

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## Additional services

### Patient Advice and Liaison Service (PALS)

PALS can offer you on-the-spot advice and information when you have comments or concerns about our services or the care you have received. You can visit the PALS office between 9.30am and 4.30pm, Monday to Friday in the main corridor between Grosvenor and Lanesborough wings (near the lift foyer).

**Tel:** 020 8725 2453 **Email:** [pals@stgeorges.nhs.uk](mailto:pals@stgeorges.nhs.uk)

## NHS Choices

NHS Choices provides online information and guidance on all aspects of health and healthcare, to help you make decisions about your health.

**Web:** [www.nhs.uk](http://www.nhs.uk)

## NHS 111

You can call 111 when you need medical help fast but it's not a 999 emergency. NHS 111 is available 24 hours a day, 365 days a year. Calls are free from landlines and mobile phones.

**Tel:** 111

## AccessAble

You can download accessibility guides for all of our services by searching 'St George's Hospital' on the AccessAble website ([www.accessable.co.uk](http://www.accessable.co.uk)). The guides are designed to ensure everyone – including those with accessibility needs – can access our hospital and community sites with confidence.

*With thanks to:*

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[www.completesportscare.com.au/team/dr-peter-malliaris/](http://www.completesportscare.com.au/team/dr-peter-malliaris/)



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