

Extracorporeal Shockwave Therapy

This leaflet explains more about extracorporeal shockwave therapy, including the benefits, risks and any alternatives and what you can expect from your treatment. If you have any further questions, please speak to a doctor or nurse caring for you.

What is extracorporeal shockwave therapy and how does it work?

In extracorporeal shockwave therapy (ESWT) a series of acoustic shockwaves is given to the area where you are having symptoms.

These waves are mechanical not electrical. They make the area inflamed, which speeds up your body's healing process by increasing blood circulation and metabolism.

It may also give you some pain relief straightaway or for some people a bit later.

Shockwave therapy can be used to help with:

- heel pain (plantar fasciopathy)
- Achilles tendon pain (Achilles tendinopathy)
- tennis elbow (lateral epicondylgia)
- calcium build up in tendons (calcific tendinopathy)
- pain in the tendon below the kneecap (patellar tendinopathy).

Why should I have ESWT?

The treatment should help reduce your pain so you can go back to your normal activities and carry out your exercises and rehabilitation

more easily.

What are the risks?

Complications do not normally happen with shockwave therapy. It is low risk but is not always successful.

It can cause increased pain and sensitivity, which normally gets better with time.

People who have poor sensation (neuropathy) or hypersensitivity at the proposed treatment site should not have ESWT.

When should I not have ESWT and when do I need to be careful about treatment?

ESWT is NOT allowed if you:

- are pregnant
- have had a steroid injection to the same area in the last three months
- have an infection, wound or tissue problems at the proposed treatment site
- are under 18
- have poor sensation (neuropathy) or hypersensitivity in the target area.

You must tell the clinician if you:

- have a cardiac pacemaker
- are taking any anti-coagulant (blood thinning) medication
- are taking any anti-inflammatory medication.

Are there any alternatives?

Tendon problems can also be treated through physiotherapy with exercise, activity modification, footwear or splints.

How can I prepare for ESWT?

Make sure you wear good supportive footwear and continue to follow the advice given by your clinician.

You should stop taking non-steroidal anti-inflammatory drugs such as aspirin, 24 hours before ESWT treatment.

Asking for your consent

It is important that you are involved in decisions about your care and you are required to sign a consent form to indicate that you agree to have the treatment and understand what it involves. You can change your mind at any time, even if you have signed the consent form.

If you would like more details about the consent process, please ask for a copy of our policy.

What does the treatment involve?

We offer three sessions of shockwave therapy, with one or two weeks in between. Each treatment takes between five and ten minutes.

The painful area is located through palpation and gel is applied to improve the transmission of the shockwaves.

Treatment is then delivered through a handheld device attached to a shockwave machine.

Will I feel any pain?

The treatment can be painful, but if the pain gets too much, the settings can be adjusted to reduce it. You may also have a mild ache after the treatment which should pass after a day.

What should I do after treatment?

You can carry on with your usual activities but avoid any exercise which feels painful for two days (48 hours) after treatment.

Don't put ice on the treated area or take any non-steroidal anti-inflammatory medication such as aspirin, ibuprofen or

diclofenac, as this will stop the inflammatory and healing processes the shockwave treatment has started.

You may feel pain relief from the treatment straightaway but long-term effects are normally felt after three months. You will have a follow up appointment in clinic three months after your treatment.

Other advice and useful sources of information

Shockwave therapy may work better when combined with exercise. If you have been prescribed exercises and stretches please continue with these.

There are NICE (National Institute for Health and Care Excellence) recommendations on ESWT for patients with Achilles tendinopathy and plantar fasciitis. See the NICE website www.nice.org.uk

Contact us

If you have any questions or concerns about ESWT, please contact the orthopaedic physiotherapy practitioners on 020 8725 1422 (Monday to Friday, 9am to 4.30pm).

For booking enquiries, please contact central bookings on 020 8725 0007 (Monday to Friday, 9am to 5pm).

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit www.stgeorges.nhs.uk

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

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

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 our services by searching 'St George's Hospital' on the AccessAble website (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.

Tel: 111



Reference: PHY_EST_03_LP **Published:** January 2022 **Review date:** January 2024