

ABOUT YOUR ACHILLES

The 2 large powerful calf muscles at the back of the lower leg, called the soleus and gastrocnemius, join together to form the Achilles tendon. This strong tendon attaches to the back of the heel bone and helps transfer forces generated from the muscles to help pull your foot in a downward movement during walking and running.

For most of us this movement is performed many times on a daily basis and, as such, the tendon has to be able to generate and handle a lot of sustained force.

WHAT IS TENDINOPATHY?

Micro-tears in the Achilles tendon can weaken the structure and cause pain. These tears can be a result of a sudden excessive loading, such as sprinting, but more commonly they develop gradually as a 'wear-and-tear' effect. The tears can be partial or full thickness, but both result in tendon damage which is termed a tendinopathy.

HOW COMMON IS IT?

This injury is prevalent in runners or those who take part in sports where running is involved. However, it can also affect people who live more sedentary lives as the tendon often weakens through disuse. Tendinopathies tend to occur more frequently in the diabetic population.

WHAT ARE THE SYMPTOMS?

The main complaint is one of pain that runs along the course of the tendon and often at the heel where the tendon attaches. The classic presentation is one of pain experienced by the downward movement of the forefoot (as the heel lifts from the ground during walking, for example).

There is often a noticeable thickening of the tendon and pain may be experienced when the tendon is squeezed. Sporting pastimes, even walking, can be made difficult, and this often results in the sufferer having to withdraw from previously pleasurable leisure activities.

WHY DOES IT OCCUR?

The exact causes of Achilles tendinopathy remain unclear. There are various theories but links have been made to overuse stresses, lack of muscle flexibility, poor blood supply, genetic make-up, and even gender.

Mechanical causes can also contribute to the problem. These are thought to include biomechanical factors, training errors, inappropriate footwear or incorrect equipment use during sporting activities.

However, excessive loading of the tendon, for example during sports training, is thought to be one of the main contributors towards the onset of this problem. The Achilles tendon may be unable to respond to this frequent loading resulting in degeneration and/or inflammation. The tendon may not have enough time to recover in between bouts of activity, eventually resulting in tendon damage.

WHAT TESTS MAY BE DONE?

You may be referred to a podiatrist for a biomechanical assessment. This is to see whether your lower limb or foot movement during walking or running is having an influence on tendon stresses or the discomfort you are experiencing. They will also be able to offer you advice as to whether external factors, such as footwear choice or training patterns, are also contributing to the problem.

It is possible your podiatrist may ask your GP to arrange for an ultrasound scan if your tendon does not respond to treatment. You may also be referred to a physiotherapist if the podiatrist feels that the cause arises from a problem higher up in the body.

WHAT ARE YOUR TREATMENT OPTIONS?

We appreciate that as you are attending this service you have probably had the problem for some time, or it is quite severe. Treatment, however, is usually non-surgical. The best approach is to start treating the problem using a combination of strategies.

1 Podiatry

Rest, in combination with icing and an appropriate strengthening regimen, is important in helping to reduce, or reverse, the effect of degeneration. The podiatrist will often suggest certain stretching techniques that should help improve the stiffness in your calf muscles. Orthotics may also be issued to help reduce the harmful stresses travelling through the tendon.

2 Physiotherapy

You may be referred to a physiotherapist in combination with the podiatry treatment.

3 Self Help - Activity Modification

Consider your training schedule – if you are doing too much and not allowing enough recovery, or if you are using incorrect techniques, or wearing inappropriate footwear then you will need to - ***change things!***

SURGICAL OPTIONS

Surgery may be considered if the tendon has not responded beneficially to the above measures. It is possible that problematic changes to the tendon, such as the build-up of degenerative tissue, can be removed from the tendon using surgical techniques. Your podiatrist will be able to arrange a referral to an appropriate specialist.

This leaflet has been written to help you understand more about the problem with your foot. This leaflet is not a substitute for professional medical advice and should be used in conjunction with verbal information and treatment given.

Patient Booking Line: 0203 633 3554 (local)

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