

What is Achilles Tendinopathy?

An information guide



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The Achilles tendon is the large tendon at the back of the ankle. It connects the calf muscles (Gastrocnemius and Soleus) to the heel.

Achilles tendinopathy (otherwise known as Achilles tendinitis) is a condition when the tendon becomes thickened and sore. This occurs when the tendon is unable to adapt to the strain being placed upon it. This leads to changes within the tendon fibres and results in the tendon attempting to heal in response to the strain.

Achilles tendinopathy can be of recent onset (acute) or longstanding (chronic). If the warning signs are ignored or it does not recover fully, it can become chronic which is a difficult condition to treat.

Causes

The specific cause still remains unclear.

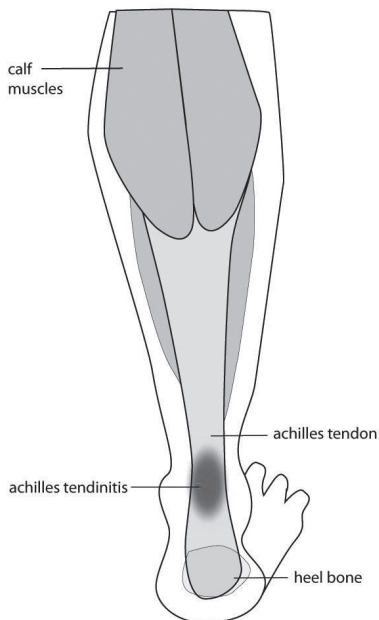
There are many factors that can put you at risk of developing the problem:

- Foot posture - If your feet roll in (pronation) or you have high arches when you run, this can increase the strain on the Achilles tendon
- Weight - Higher than average BMI
- Diabetes and Inflammatory spinal conditions put you more at risk
- Tight or weak calf muscles
- Poor endurance of the muscles
- Poor muscular control around the hip and knee
- Referral from the nerve in your leg
- Stiff joints in the foot

- Overuse or a change in training - Exercise and repetitive exercise can also have an impact.
- Incorrect footwear or worn out trainers can increase the chances of developing the problem

How common is it?

Achilles tendinopathy is a relatively common soft tissue injury that can affect both athletes and non-athletes. It is more common in people who participate in sport that predominantly involve running such as football, tennis, volleyball, badminton, middle and distance running. It affects people of all ages and both men and women.



Exercises for Achilles Tendinopathy

This programme needs to be completed for at least three months

1. Stretching Exercises (if advised by your physiotherapist)

*Hold all the stretches for **20 seconds** and repeat them three times on each leg*

A - Gastroc Stretch



Take position shown above, feet forwards and heels in contact with the floor. Slowly take your hips and pelvis forward. You should feel a stretch in your calf muscle area.

B - Soleus Stretch



Keep the same position as stretch 1 but bend the back knee while keeping the heels on the floor. Again you should feel this stretch in your lower calf area and feel slightly different from stretch 1.

C - Flexor Halluces longus Stretch



Again in the same position as above, bring your back foot forward and place your big toe against your heel so that it stretches your toe upwards. The muscle you are stretching is attached to your toe.

Pain relief

- **Apply Ice:** In a damp towel
- **Simple pain killers:** Paraceramol or anti-inflammatories
- **Relative rest:** Maintain fitness using exercises that involve low impact

2. Strengthening Exercises



Progression Speed

Your physiotherapist will advise you on the speed you should progress your exercise and the level you are aiming towards. Progression is not just about being able to do the exercise but to do it correctly. It should be performed with pain that is tolerable.

It is normal to feel pain with the exercise, this is what we expect. However, if the pain becomes disabling please stop. Resume the strength training the following day.

If English is not your first language and you need help, please contact the Interpretation and Translation Service

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Date of publication: September 2019

Date of review: August 2021

Date of next review: September 2023

Ref: PI(DS)049

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