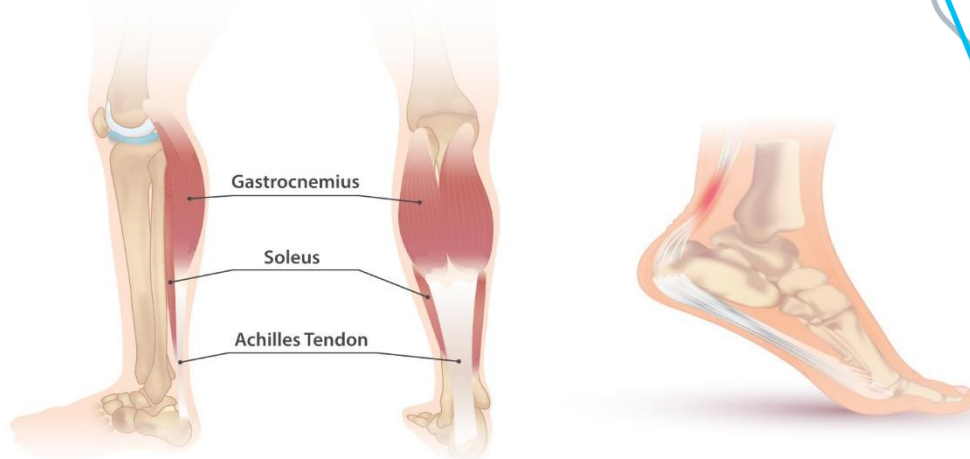


# Achilles Tendinopathy

## Patient Information



<https://www.injurymap.com/free-human-anatomy-illustrations> <https://www.injurymap.com/diagnoses/achillestendonitis>

### What is your Achilles tendon?

The **Achilles tendon** is fibrous tissue that connects the muscles of the calf (Gastrocnemius & Soleus) to the heel. Contracting the calf muscles pulls the Achilles tendon, which pushes the foot downward. The strength of this tendon is essential for activities such as for standing on the toes, walking, running, and jumping.

### What is Achilles tendinopathy?

It involves changes to some of the fibres of the tendon. This can be after an injury, or it can occur if the tendon is stressed repetitively over time. It is thought that these changes can lead to loss of the normal strength of the tendon, which can then lead to pain, as the tendon is not tolerating the demands placed upon it. You may also get local thickening of the tendon.

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### What causes Achilles tendinopathy?

There can be a number of contributing factors including;

- Sudden changes in activity e.g., increase in running or jumping activities.
- Weak or tight muscles in the calf, or in the hip/knee
- Inappropriate or poor-quality footwear
- Long periods of inactivity followed by bursts of activity
- Increased body weight

### What are the symptoms?

- Pain at the back of the ankle, just above the heel bone.
- Pain and stiffness that is worse in the morning or after periods of rest.
- Pain on exercise and walking, especially uphill or upstairs.
- Tenderness over the tendon.
- Swelling, thickening or nodules over the tendon.

### How long will it last?

The process of recovery will vary according to the severity of your symptoms, other contributing factors and your progress with Physiotherapy rehabilitation. With the right exercises, most people make a good recovery within a period of **3 months**, but occasionally symptoms can last longer.

### What can I do to help myself?

- **Short term rest** can be beneficial but prolonged rest should be avoided. Decreasing or modifying your activities temporarily can help alleviate symptoms, but don't stop being active.
- **A heel raise** can be used in BOTH shoes to try and offload the Achilles tendon. Alternatively wearing shoes with a bigger heel can help.
- **Heat or cold** can be used to help pain. Use an ice pack wrapped in its cover or a damp tea towel for up to 15 minutes. Alternatively try using a wheat bag/hot water bottle wrapped in a towel/cover. Make sure to protect your skin with a towel and regularly check your skin to avoid any skin damage, as both can cause burns if used incorrectly.
- **Losing weight** may be helpful if you have a high BMI. The following tool will help you to work out your BMI;  
<https://www.nhs.uk/live-well/healthy-weight/bmi-calculator/>  
Speak to your GP or another Health Professional if you would like help and advice with this, or follow the link provided at the end of this leaflet.

## **Strengthening Exercises**

Exercises can be used to increase the functional strength in your Achilles tendon, and it will become more able to tolerate the loads placed upon it. Over time this will help to settle the irritation and pain that you are experiencing. The exercises in this leaflet become more difficult as you progress through from exercise one up to three. These are the type of exercises that may be prescribed by a physiotherapist. Try starting on exercise one and as you are comfortable progress to the next exercise. You may only be able to do a small amount at the start, but this will improve over time. A small increase in pain while exercising is okay as long as it goes away within 30 minutes and is not worse the next day. If you do get an increase in pain, don't worry, do fewer repetitions the next time and then gradually build up again. If you follow the instructions and exercises in this leaflet, there is an excellent chance you will improve your pain and not need any more treatment. If your pain does not start to improve within 12 weeks, or gets worse despite the exercises, you will need to visit your health professional again. Even if you are only seeing slight improvements keep doing the exercises, often it can take 3 months or longer to get a significant improvement in your pain and function.

## **Getting the most from your exercise**

- Build the exercises into your daily routine so you can do them regularly.
- Find time when you are not under pressure and can give the exercises your full attention.
- Try to do the exercises at least every other day.
- Complete the exercise you are on for 4 sets of 8 repetitions, with a 2-minute rest between each set.
- The pacing of these exercises is very important. It is useful to use an external cue to pace your 3 seconds up and 3 seconds down. To pace yourself try using a Metronome 60BPM, or use a clock/timer.
- Your physiotherapist can highlight which exercises are the best for you to try.
- It helps to keep an exercise diary to record how many repetitions you have done and see how you are progressing.
- Your physiotherapist may recommend other exercises for you that relate more specifically to your individual problems or will help you to do your job, hobbies, or sporting activities without pain.

**1) Bilateral heel raise**

Stand with your feet halfway onto a small step. Slowly push up onto your toes over 3 seconds and then slowly lower yourself back down over 3 seconds. If needed, you can place your hands on a wall for support. If this is too difficult, start on a flat surface rather than a step.

**2) Off set heel raise**

Stand with your unaffected foot on a small step and your affected foot on the floor. Slowly push up onto your toes of the affected foot over 3 seconds and then slowly lower yourself back down over 3 seconds. If needed, you can place your hands on a wall for support.

**3) Single leg heel raise**

Stand with your affected foot halfway onto a small step. Slowly push up onto your toes over 3 seconds and then slowly lower yourself back down over 3 seconds. If needed, you can place your hands on a wall for support. If this is too difficult, start on a flat surface rather than a step.

Recovery times for this condition are quite variable, depending on the severity and duration of your symptoms. Try to stay positive and as you are able progress through these exercises over a 3–6-month period. If after 3-6 months your symptoms are failing to improve, please see the options available to you below.

### **Other treatments that may be offered**

- Referral to a **podiatrist** for biomechanical assessment and provision of insoles for your shoes as appropriate.
- In cases of severe pain which does not improve you may be referred to an Orthopaedic Surgeon. However, this is rarely necessary.

### **Further Information**

If you would like to seek the advice of a physiotherapist, there are a number of options within Wiltshire. Please speak to your GP practice about the ways you can be referred.

Alternatively, you can visit our website for further information on accessing our services; <https://wiltshirehealthandcare.nhs.uk/physiotherapy/>

### **Other useful websites;**

<https://www.activewiltshire.org.uk/>

Here you will find information on improving your activity level and details of what is available in your local area.

<http://www.wiltshire.gov.uk/public-health-weight>

Here you will find information about weight management options in your local area.

### **Health improvement coaches - Wiltshire Council**

Health Improvement Coaches work on a one-to-one basis to support behaviour change and improve health. They concentrate on behaviours associated with ill health including unhealthy eating often linked to obesity, stop or reduce smoking, sensible drinking, increasing physical activity, building confidence and motivation to change and boosting self-esteem, they also signpost and support clients to access other services and activities where appropriate.

## **Safeguarding**

Wiltshire Health and Care (WHC) are committed to safeguarding and promoting the welfare of children, young people, and adults at risk of abuse, including victims and survivors of domestic abuse. We expect all WHC staff to share this commitment and promote safeguarding by implementing WHC policies and procedures, act promptly on concerns and share information appropriately.

If you or your carer have any concerns regarding a child or adult's safety, please phone Wiltshire Safeguarding Team on 0300 456 0111 (Adult) or 0300 456 0108 (Child) (9am – 5pm Monday - Friday) or please call 999 if you feel they are in immediate danger.

## **Patient Advice and Liaison Service (PALS)**

If you have any questions, or concerns, suggestions, or compliments about our service, please speak to a member of staff.

This information sheet is available in other languages and formats. If you would like a copy, please contact us on 0300 123 7797 and [whc.pals@nhs.net](mailto:whc.pals@nhs.net)

## **Patient and Public Involvement**

We value your opinions which will help us to further develop our services.

If you wish to provide feedback or get involved in our patient participation groups, please email the Patient and Public Involvement Officer at [ask.wiltshirehealthandcare@nhs.net](mailto:ask.wiltshirehealthandcare@nhs.net) or telephone 01249 454386.