



Information Sheet for patients with Achilles Tendinosis / Tendinitis

Your Condition

Just like joints, tendons are also subject to wear and tear, or “degeneration”. When it occurs in the Achilles tendon, it can result in pain and swelling (‘Tendinitis’) or sometimes rupture of the tendon. Typically there is increased pain during or after running or walking. Some people suffer painful flare-ups lasting for days/weeks, with the symptoms subsiding in between these flare-ups. The exact cause of the condition is not known, and it can be difficult to treat. When you hear of a professional athlete having a “niggling Achilles injury”, this is usually Achilles tendinosis.

After 10–14 days, you will be placed in a definitive below-knee cast, but will not be allowed to weight-bear at that stage. You must keep this cast dry. The length of time until weight-bearing is permitted varies with the operative technique used, and you should ask your surgeon about this before the operation. After 6 weeks, you will usually be allowed “protected weight-bearing” in a special removable walker-boot or weight-bearing cast. The usual length of time until unprotected weight-bearing after a midfoot arthrodesis is 10 – 12 weeks.

How can it be treated?

Treatment of a flare-up is **rest**.

There are a number of ways of resting the tendon:

- Reduce running/walking
 - Heel lift shoe inserts
 - Immobilisation in a cast or “walker boot”
- Additionally, your doctor may recommend **anti-inflammatory painkillers** during a flare-up, especially if there is redness and swelling.

The mainstay of treatment is prevention of flare-ups, however. A number of treatments have been tried, including laser, ultrasound, electrical stimulation and shock-wave therapy. The most effective treatment is thought to be a particular regime of stretching exercises, called **Eccentric Strengthening**¹. This strict regime can be up to **95% effective** in 3 months.

The exercises

To be effective, the exercises must be performed **twice a day for 12 weeks**.

Exercise 1 (with knees straight):

- Stand with heels over the edge of a step
- Hold onto the doorway for balance
- Rise up onto the toes of the unaffected leg only
- Transfer your weight onto the toes of the affected leg only
- Slowly lower the heel of the affected leg below the level of the step
- Transfer your weight and repeat cycle **15 times (= one “set”)**
- **Perform 3 sets with 30-second rest in between.**

Exercise 2 (with knee bent):

- As above but lowering the affected heel over the step with the knee bent.

You may find the exercises painful, especially for the first few weeks: this is expected. Only stop if the pain becomes severe.

Once you have no pain, you may start performing the exercises with weights or a loaded rucksack (up to 30 to 40lb only).

Having Achilles tendinosis does theoretically put you at risk of tendon rupture, but conditioning your tendon with the above exercises is not thought to increase this risk. If you think you have ruptured your tendon, you should seek medical advice immediately.

1. Alfredson H et al. “Heavy load calf muscle training for the treatment of Achilles Tendinosis”. American Journal of Sports Medicine 1998 26(3): 360-366.