

# Achilles Tendinopathy

## Staff Information Leaflet

**This leaflet is designed to give you an understanding of Achilles tendinopathy, treatment that may be beneficial, and some advice on what you can do to help yourself. If your symptoms persist: you should seek advice from your GP or occupational health service.**



## Introduction

The calf muscles are the group of muscles at the back of the lower leg. They consist of the Soleus and the Gastrocnemius muscles. Both muscles insert into the heel via the Achilles tendon. A tendon is the term for fibres that connect muscle to bone. The Achilles tendon's function is to plantar flex the foot (point the toes) when the calf muscles contract.

## What is a tendinopathy?

A tendon is connective tissue made up of collagen fibres which attaches muscles to bone. To enable movement muscles contract (shorten), pulling on tendons which cause movement of bones at joints. Tendinopathy is the term used for failed healing response of a tendon. This often occurs after the structure is overloaded or underloaded by excessive or lack of forces applied through these structures. Healthy tendons require optimal loads/forces through them, this means that complete rest of these injuries is not advisable, instead activity modification and exercises to optimise forces going through the structures can promote recovery.



## Causes

Although the Achilles is the strongest tendon in the body, it can sometimes be overloaded or under loaded, leading to pain. Achilles problems most commonly occur due to repetitive or prolonged activities that strain the tendon. This typically occurs following excessive periods of walking, running or jumping; or returning to a sport that you haven't done for a while.



## Symptoms

The common symptoms of Achilles tendinopathy include:

- Pain
- Stiffness
- Thickening of the tendon
- Pain when squeezing the tendon

In less severe cases, pain may only occur after exercise or prolonged activity. These symptoms are typically experienced at night or first thing in the morning. As the condition progresses, patients may experience symptoms during activity. Pain is often felt when walking or running (especially uphill, or on uneven surfaces). In severe cases, patients may walk with a limp or be unable to bear weight on the affected leg.

## Factors exacerbating Achilles tendinopathy

- Joint stiffness (particularly the ankle)
- Muscle tightness (particularly the calf muscles)
- Inappropriate or excessive training
- Biomechanics
- Foot positioning
- Inappropriate footwear
- Inadequate warm up
- Muscle weakness
- Poor balance and stability
- Being overweight

## What can I do to help my symptoms?

Achilles tendon problems can improve significantly within 3–6 months if the correct advice and exercises are followed.

### Pain relief

Simple analgesia such as Paracetamol and an anti-inflammatory such as Ibuprofen can be very effective for the treatment of Achilles pain in the early stages of injury. You can obtain advice regarding medication from your local pharmacist or GP but remember to read the packet; and do not take over the recommended dosage.



## Activity

Complete rest can be a bad thing. Prolonged rest will cause the muscles and tendons to weaken, prolonging the symptoms. Activity/exercise modifications should be considered to help manage symptoms.

If your symptoms have become aggravated with sudden increases to physical activity/exercises levels, for example running, then you may wish to consider reducing the duration, intensity, or frequency of your runs on a weekly schedule to influence symptoms.

If you have stopped physical activity/exercise all together due to the flare up in symptoms, you may wish to resume these activities at lower intensities and see how your symptoms are in the 24 hours after participating. If symptoms aren't significantly flared up then you may repeat and gradually increase the duration intensity and frequency of these over a month period as pain allows.

## Foot wear

You may find more comfort from wearing supportive shoes which slightly raise the heel.

## Exercises





The exercise programme on the next page has been designed by our physiotherapy team to aid with managing Achilles Tendinopathy.

It is normal to experience discomfort when completing these exercises however, **do not** continue the exercises if they significantly increase your pain or swelling. If this were to occur, please see your GP / Physiotherapist for further advice.

This programme is to be performed **every other day**. Your knee's should be in a slightly bent position throughout these exercises. You should only complete **one** of the exercises below then progress to the exercise lower down the table once able.



## Achilles Tendinopathy Exercise Programme

Exercise	Repetitions	Sets	Description	Image
<p>Isometric heel raise.</p> <p>Once you can manage 3 x 60 seconds begin Progression 1 below.</p>	30-60 seconds	3	Lift your heels off the floor by 1-2 inches and hold this position for 30-60 seconds.	
<p>Progression 1</p> <p>Heel raises on flat.</p> <p>Once you can manage 3 x 12 seconds of this exercise begin Progression 2 below.</p>	<p>12 repetitions</p> <p>(Go up for 3 seconds, hold for 2 seconds at the top of the repetition then lower for 3 seconds)</p>	3	Perform full heel raises from a flat surface	
<p>Progression 2</p> <p>Heel raises on step.</p> <p>Once you can manage 3 x 60 seconds begin Progression 3 below.</p>	<p>12 repetitions</p> <p>(Go up for 3 seconds, hold for 2 seconds at the top of the repetition then lower for 3 seconds)</p>	3	<p>Perform full heel raises from a step.</p> <p>If uncomfortable when heels below the step then remain on progression 1.</p>	
<p>Progression 3</p> <p>Single leg heel raises on step.</p>	<p>12 repetitions</p> <p>(Go up for 3 seconds, hold for 2 seconds at the top of the repetition then lower for 3 seconds)</p>	3	<p>Perform single heel raises from a step.</p> <p>If uncomfortable when heels below the step then remain on progression 1.</p>	



## What about work?

Maintaining all normal activities including work improves your chance of recovery by keeping you moving. This helps you keep your 'work fitness' and prevents your lower leg muscles getting weaker, which can prolong your Achilles pain.

**Remember: You do not have to be pain free to return to or remain at work.**

It may be necessary to do temporary lighter or modified duties. This should be discussed with your line manager initially. If further clarification is needed: your Occupational Health advisor can identify more specific role modifications.

## What should I do if I am still experiencing problems?

If you are unable to agree on restricted roles with you manager, or you are still having problems (despite following this advice): your Occupational Health team can help. The Occupational Health team can advise you on how to bridge the gap to help you return to normal activities. You can also gain access to the Occupational Health physiotherapy team by:

### Self-referral

The Occupational Health Physiotherapy team can assist in the management of musculoskeletal problems that affect your ability to work. Staff are able to self-refer to physiotherapy via the trusts Occupational health internet page.

<https://www.newcastle-hospitals.nhs.uk/services/newcastle-occupational-health-service/>

### Management referral

If you feel your symptoms are having a significant effect on your ability to carry out your role, discuss this with your manager and request a referral to the Occupational Health Service.

For more information on Achilles tendinopathy please follow the links below:



**Tyneside Integrated  
Musculoskeletal Service**

<https://www.tims.nhs.uk/wp-content/uploads/2020/07/TIMS-Achilles-Tendinopathy-New.pdf>



<https://www.versusarthritis.org/about-arthritis/conditions/achilles-tendinopathy/>

**NICE** National Institute for  
Health and Care Excellence

<https://cks.nice.org.uk/topics/achilles-tendinopathy/>

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