

A decorative graphic consisting of three blue circles of varying sizes, each with a darker blue center and a lighter blue outer ring. Two thin blue lines intersect at the top left, forming a large 'V' shape that frames the circles. The circles are positioned in the upper right, middle, and lower right areas of the page.

Achilles Tendonitis

Common Lower Limb Functional Disorders

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**Paul Gabriel Scullion
Podiatric Surgeon**

SIGNS AND SYMPTOMS

Chronic pain from this condition manifests itself either at the attachment of the tendon onto the heel bone or along the body of the tendon cord. Rarely does it involve injury at the tendon muscle junction.

Pain in this tendon can develop both with and without swelling. When there is little or no swelling then this is usually, but not always, indicative of a minor injury. During a physical examination of the tendon a sandpaper like feeling of grating may be felt and this is termed **crepitation**.

Where there is much swelling in the tendon then this needs to be taken very seriously as severe tears or even a complete rupture of the tendon might happen from the simplest of incidents.

Please beware where the tendon is painful but without swelling great care still needs to be taken a tear or rupturing can still develop quite quickly should you persist with your activities.

WHAT'S GOING ON?

Your Achilles tendon is the thin cord of tissue that connects your heel bone to the calf muscles. It is made up of three tendons from three muscles called **gastrocnemius**, **soleus** and a small underdeveloped muscle called **plantaris** believed to be a remnant from our simian past. These three muscles make up 4/5's of the muscle bulk of your calf. This fact alone demonstrates the power associated with this tendon.

Most other major tendons in your body are situated close to good blood filled muscle bellies that can contribute an excellent supply of nutrients for any tendon injury. Typically your Achilles is a very strong tendon however, the older you get, the blood supply to the tendon diminishes.

Your Achilles tendon derives its nourishment from a thin covering sheath called the **paratenon**. Therefore, should you injure this tendon then the healing of the site may be quite slow due to this poor blood supply and when neglected, your tendon may become chronically painful and swollen.

HOW IS IT TREATED?

Treatment for the non-swelling minor Achilles tendonitis consists of resting the tendon. This may simply involve the use of a reasonable heel raise placed inside your shoe. The effect of this is to encourage the calf muscle to do less of the lifting work that is required for propulsion during walking and running. This rest allows your tendon to heal during most simple activities. Moderate and controlled stretching routines are also of great help. Stretching of the calf muscle before and after activities will help your foot and ankle retain a more normal range of movement required for walking. Stretching will also counteract any reactive painful spasm and stiffness your calf muscle will naturally develop in its attempt to protect the injured site.

Occasionally, your non-swelling but chronically painful Achilles tendonitis may be associated with a flat foot. The abnormal inward rolling movement of your foot during full weight bearing may cause one side of the tendon cord to become over stretched and the other side to become compressed. In cases like this custom foot orthoses are an ideal treatment as they control and prevent these abnormal foot movements during all daily and sporting activities.

As stated previously, where noticeable swelling occurs around your Achilles tendon then all is not well. A trained hand will feel the body of the tendon and can locate a tear. When tearing of the tendon occurs then full rest with secession of all weight-bearing sports activities is obligatory. Your leg may require compressive strapping and the use of crutches to help keep you mobile. Natural healing for such an injury can take between six to eight weeks. Anti-inflammatory medication along with gentle massage and stretching of your injured site will be beneficial in assisting a normal recovery. Strictly avoid ballistic sports activities such as Squash if you have noticeable swelling.

Where the tendon is fully ruptured then hospitalisation and surgical repair is inevitable. The mechanism of rupture can be quite strange for the unfortunate individual and has been described by some victims as feeling as if someone had kicked them in the back of the leg followed immediately with the loss of power in pushing off the ground during normal walking.