

PATIENT INFORMATION

ACHILLODYNIA

NEW OPTIONS FOR
TREATMENT AND AFTERCARE

BETTER IN MOTION



DEAR READER

We have put together this brochure especially for people who have problems with their Achilles tendon.

We have compiled information for you on the most common causes of Achilles tendon problems, conservative therapy, how bandages work and a selection of exercises designed to actively rehabilitate your ankle.

The Achilles tendon is the strongest tendon in the human body and represents the terminal tendon of the calf muscles. It transfers forces to the heel bone, allowing the ankle to flex towards the sole of the foot.



Achilles tendon symptoms can occur suddenly and/or develop over time. In accordance with the anatomical structures involved, these symptoms may occur in the calf (tennis leg), the main body of the Achilles tendon (mid-portion tendinopathy), the area close to the attachment of the tendon via the bursa and bony cusp of the heel bone (insertion tendinopathy, sub-Achilles bursitis, Haglund bump) and the area in which the Achilles tendon attaches to the heel bone itself (e.g. dorsal calcaneal spur).

If you have any questions or are uncertain about your condition, its treatment or the rehabilitation process, please contact the doctor who is looking after you.

ACHILLES TENDON PROBLEMS

ACHILLODYNIA

Excess strain, stiff / contracted calf muscles, recurring micro-trauma, inadequate recovery, being overweight and the shape of the foot can all encourage conditions such as achillodynia. This condition causes a spindle-shaped widening of the tendon, the formation of new blood vessels, adhesion of the connective tissue, pain on initiating motion and pain on exertion which can, over time, also develop into pain at rest.



SYNOVITIS / HAGLUND BUMP

Widening of the bony bump on the heel bone (known as the Haglund bump) and inflammatory symptoms affecting the bursa (sub-Achilles bursitis) can produce pain at the attachment of the Achilles tendon to the heel bone which gets worse with exertion.

(PARTIAL) TEARS OF THE ACHILLES TENDON

Partial tears of the Achilles tendon are associated with acute or chronic excessive strain of the tendon. Other causes can include excess strain, certain medications, systemic conditions and age. Achilles tendon ruptures are usually associated with a whip-like crack and severe, shooting pain. An indent can be felt or seen.

TREATMENT

CONSERVATIVE THERAPY

Many Achilles tendon symptoms can be treated conservatively. The emphasis here is on reducing pain, reducing or avoiding triggering causes and encouraging the tendon to regenerate. More recent concepts often follow multi-stage approaches to treatment. These include, for example, optimisation of the load distribution, if necessary with the provision of insoles, bandages for compression and soft tissue mobilisation, strengthening, stretching and balance exercises, ultrasound therapy and extra-corporeal shockwave therapy.



In terms of medication, pain-relieving and anti-inflammatory drugs can be used for a short time both locally and systemically. Steroid preparations and some antibiotics should be avoided if possible since these inhibit the regeneration of the tendon and can encourage the development of ruptures.

If the symptoms do not diminish over a prolonged period of time, further therapeutic options, such as surgery, may need to be explored.

BANDAGES

SPORLASTIC Achilles tendon bandages, made from anatomical 3D flat-knit fabric, can support the healing process. Functional compression and specially integrated silicon pads massage the Achilles tendon and the surrounding tissue, stimulating local metabolism and helping to achieve strain and pain relief as well as regeneration.



ACHILLO-HIT®

The bandage featuring AIR-MATRIX silicon pads can have a relieving effect thanks to stimulation of large areas of tissue and an optimised massage effect. High-quality velours and innovative perforations ensure more breathability and greater wearing comfort. The three-part comfort zone ensures a crease-free fit. A QR code integrated into the product provides direct access to guided, digital therapy exercises and information.

ACHILLODYN®

The septated pads in the central area of the Achilles tendon perform a massage effect and encourage the flow of blood. The heel wedges can be used if a temporary reduction in tension is required for the Achilles tendon. The second heel wedge for the healthy side prevents any misalignment of the pelvis. The expandable, special knit ensures a crease-free fit.


RELAX MUSCLES

EXTENSION

Careful extension is especially important. Extended and relaxed calf muscles can have a positive impact on the healing process. The toe flexors also need to be extended for this reason.

EXTENSION OF THE CALF MUSCLES


In the walking position and with the knee stretched, stretch the calf to the pain threshold. Then push the foot against the floor. Then relax and extend the calf muscles further.

 Do this for 15 seconds each time



EXTENSION OF THE TOE EXTENSORS

Position the toes against a wall or door frame. Extend the knee to the pain threshold. Then push the toes against the wall. Then relax and extend the toe extensors further.

 Do this for 15 seconds each time

STRENGTHEN MUSCLES

STRENGTH & COORDINATION

Chronic Achilles tendon problems often lead to a loss of strength in the calf muscles. Coordination of the muscles is important so that they are able to respond appropriately to external forces acting on them. A muscle trained in this way is able to reduce the load on the tendon.

CALF STRENGTHENING


First fully extend both knees, then stand on your tip-toes and then go back down again (e.g. on the tread of a stair).

 Repeat 2 x 10 times



COORDINATION AND PROPRIOCEPTION

Maintain your balance on unstable ground while barefoot, e.g. on a rolled-up towel or wobble board. This trains rapid motion of the muscles into various joint positions.


 2 x 30 seconds

BUILD UP MUSCLES STRENGTHENING

The following exercises can be performed to build up the strength of the muscles surrounding the foot and ankle.

FOOT ELEVATOR MUSCLES


Securely attach the therapy band. Hook the forefeet, keep your back straight. Draw both feet up towards your knee and then slowly relax them again. Point the toes to the ceiling, do not extend the knee fully.

 Repeat 3 x 10 - 15 times



PRONATOR STRENGTHENING

Knot the therapy band and wrap it around the feet. Hook the mid-foot, keep your back straight. Against the resistance of the therapy band, pull the outer edge of the foot outwards and toward the knee, and then slowly relax again.


 Repeat 3 x 10 - 15 times

STIMULATE CONNECTIVE TISSUE MASSAGE

Regular connective tissue massage helps to prevent stiffness in the tendons which can be the cause of pain on initiating motion in a morning. This can be done either through self-massage or with exercises involving the BLACKROLL®.

SELF-MASSAGE

Powerful longitudinal strokes with your own thumb or a hedgehog ball on the lateral contours of the Achilles tendon, the superficial and deep calf muscles.

 1-2 minutes



BLACKROLL®

To counteract stiffness, use the BLACKROLL® like a rolling pin to "softly knead" the muscles. Place the calf on the BLACKROLL® and then roll it back and forth. The weight of the lower limb can be increased with pressure.

 Repeat 3 x 10 times

SPORLASTIC ORTHOPAEDICS – BETTER IN MOTION

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