



Name of Patient:	Male
Age:	45 years old
Sport / Occupation:	Football & circuit training
Level of Activity:	3 - 4 times weekly
Condition:	Chronic thickening of achilles tendon

ACHILLIES TENDINOPATHY- displaying chronic scar formation



Condition / aetiology:

Achilles tendinopathy is a condition that affects the lower end of the achilles tendon which connects the calf muscle to the heel.

It is considered to be an 'overuse' inflammatory condition and is very common in men, particularly, middle aged men, owing to degenerative changes that take place with age. The inflammation is a response to micro tears in the tendon. The patient will notice a gradual development in pain and tenderness often with morning stiffness.

The pain may diminish during training, only to return several hours later. The achilles has very poor blood supply, limiting the healing process.

Achilles tendinopathy very difficult to overcome; therefore early treatment is vital.

Typical Causes:

There are many causes and often the problem is multi-factional, this means that there is usually more than one cause.

Typical causes are:

- Overtraining – 'overuse' / abuse
- Degeneration of tissue owing to age
- Tight and/or weak calf muscles
- Biomechanical problems – excess pronation
- High arches – pes cavus
- Sudden changes in training levels / modes
- Multidirectional activities in running
- Deceleration on hard / high friction surfaces

In the above case study, the cause was multi-factional;

Overtraining, degeneration owing to age, tight calves combined with multi-directional running activities associated with circuit training.

Agreed Treatment Plan:

In the above case study a total of 6 treatments were administered, comprising of:

Short term:

- Patient education
- ROM measurements taken as bench marks
- Pain scale measurements taken VAS
- Followed by contrast bathing, then heat
- Stop all running / multi-directional activity
- Reduce swelling, pain and tenderness.
- Electrotherapy treatments.
- Transverse frictional massage
- Improve flexibility (ROM) in calf muscles
- Introduce eccentric stretching exercises

Long term:

- Review & modify training activities
- Restore full flexibility (ROM) in calf muscles
- Restore full strength in calf muscles
- Restore full proprioception.

Outcome:

The patient returned to training after approximately 6 weeks. The patient accepted his limitations owing to the chronic condition and age implications. Modifications to training, where future training activities would not include multi-directional running. The patient also accepted the necessity to continue with specific rehab exercises.