

Achilles Tendinopathy

Achilles Tendinopathy is an overuse injury that affects the Achilles tendon, typically causing pain, swelling, and decreased function due to repetitive stress. It develops gradually and can become chronic if symptoms persist for more than 3 months.

Key Rehabilitation Points:

- Rehabilitation focuses on **progressive loading exercises** for the Achilles tendon.
- **Rest from aggravating activities** is important initially to reduce pain and inflammation.
- **Eccentric strengthening** exercises for the calf muscles are central to treatment.
- **Gradual return to activity** with low-impact exercises, progressing to more intense activities as tolerated.
- **Footwear modifications** or using heel lifts can help reduce strain on the tendon.
- **Manual therapy** and modalities like shockwave can complement treatment.

Exercises are most effective when guided by a qualified professional, such as a physiotherapist, athletic therapist, or strength and conditioning coach. If you have any concerns, it's always a good idea to consult with an expert.

The Alfredson Protocol

Alfredson Protocol:

The **Alfredson Protocol** is a well-known eccentric exercise regimen specifically designed for Achilles tendinopathy. It involves:

- **3 sets of 15 repetitions** of eccentric calf raises, performed **twice daily** (morning and evening).
- The exercises are done with the foot **elevated** on a step, allowing for a controlled lowering of the heel below step level, followed by using the uninjured leg to raise the body back up.
- The program lasts **12 weeks**, with the intensity gradually increasing as the tendon becomes stronger and more tolerant to loading.

1. Calf Raise Eccentric | Single Leg (Step) Bent knee

Sets: 3 | Reps: 15 | Frequency: 2 times per day

Preparation:

- Stand on the edge of a stair step on your toes, lifting your heel as high as you can
- Your heel should hang over the edge

Execution:

- SLOWLY relax your heel down as low as you can, letting your heel dip slightly below the level of the step
- Return to the start position



Stand on tip toes



SLOWLY lower heel

2. Heel Lower | Single Leg (Step) straight leg

Sets: 3 | Reps: 15 | Frequency: 2 times per day

Preparation:

- Stand on the edge of a stair on your toes

Execution:

- Lower one heel down below the step
- Return to the start position



Stand on tip toes



Lower heel

Stretches and Rolling

Calf rolling is appropriate for both "insertional" and "non-insertional" tendinopathy.

Gentle stretching is appropriate if your tendinopathy is "non-insertional". Avoid stretching with "insertional" tendinopathy unless directed by a physician or physiotherapist.

1. Calf Release (Foam Roller)

Preparation:

- Sit with your calf on a foam roll.

Execution:

- Roll your calf up and down on the roll.
- Stop on tight portions of the calf muscle to allow them to release.



Sit with calf on foam roll



Roll calf up and down roll

2. Gastrocs Stretch (Wall)

Preparation:

- Stand in front of a wall with one leg forward and one leg back

Execution:

- Keeping your back leg straight and heel on ground, lean forward bending your front knee



Eyes and head forward, hands relaxed on wall, belly button pulled in



Bend elbows to move closer to the wall to stretch the back leg, keep front knee behind toes

3. Soleus Stretch (Wall)

Preparation:

- Stand in front of a wall with one leg forward and one leg back as shown

Execution:

- With the back leg bent, sit back onto your back foot, keeping your heel on the ground



Drop back knee toward ground