

New Equipment

We have recently set up a movement analysis suite at Marple Physio. This includes the latest version of Quintic's motion analysis software on a dedicated computer and video camera system. This system allows high quality, slow motion assessment of movements that are otherwise very difficult to assess with the naked eye.

Used in conjunction with a treadmill our Specialist Musculoskeletal Podiatrist, Matt Malone, uses the software to assess walking and running gait. Matt can use the resulting video footage as part of his assessment - aiding in the provision of bespoke orthotic devices (corrective insoles) to correct gait dysfunctions. Matt's patients find it fascinating to be able to see their foot and leg movements in slow motion and have any problems explained to them in an understandable way - often this greatly enhances their understanding of their problem.

The motion analysis software is not only used for assessing running and walking gait - the software also allows us to analyse pedaling technique for cyclists with lower limb pain or dysfunction - for this we video patients on their own bike on our 'turbotrainer'. In fact it can be used by our physiotherapists and podiatrist to analyse any number of functional movements in more detail, assisting us in our assessment and management of many problems.

Congratulations :

to **Kathrine Crompton** our **Sports Massage Practitioner** for successfully gaining her **MSC in Sports Injury (Science)** from **Sheffield Hallam University**

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Focus On – Achilles Tendinopathy

Patients present to our clinic regularly with achilles tendonopathy and it is a condition that we have great success treating. Therefore, in this newsletter we wanted to present some information on the problem.

The achilles tendon is a thick band of tissue that attaches the calf muscles to the back of the heel. Achilles tendonopathy, sometimes called Achilles Tendonitis, is a frequent cause of lower calf and heel pain. Achilles tendonopathy is usually characterised by degenerative changes within the achilles tendon known as achilles tendinosis. Achilles tendinosis is a breakdown in the achilles tendon, with small, focal lesions within the tendon without an inflammatory response. This degeneration means that the achilles tendon does not possess its normal tensile strength and may be liable to further damage and even rupture with continued sporting activity.

Because achilles tendonopathy is not an inflammatory condition, the use of anti-inflammatory medication, e.g. ibuprofen, is not appropriate. Ice packs can relieve pain but the key to recovering from achilles tendonopathy is in trying to elicit healing without overloading the tendon.

Published research has suggested that recovery is optimised by using a very gradually progressed strengthening programme for the achilles tendon and calf muscles under the supervision of a physiotherapist. These exercises cause the achilles tendon to adapt and get stronger. The physiotherapist should also address any biomechanical faults such as stiff foot and ankle joints or tight calf muscles as appropriate. If it is felt that faulty foot biomechanics are contributing to the problem the physiotherapist can refer the patient to a Podiatrist for further biomechanical assessment and orthotic devices (insoles to correct poor foot biomechanics). Footwear and training regimes should also be assessed.

Common Achilles Tendinopathy signs & symptoms:

- A pain in the achilles tendon that comes on gradually.
- At first achilles tendon pain is worse following activity.
- Achilles tendon pain becomes present during activity as the condition worsens.
- Often a tender thickening is noticed within the tendon.

Other less common causes of pain in the achilles region are:

- Posterior impingement syndrome
- Achilles tendon rupture
- Achilles bursitis
- Insertional achilles tendonopathy
- Sever's lesion (adolescents)
- Referred symptoms from the lumbar spine or nerve tissue

It is not possible to go into all these conditions in detail, but if you have achilles tendon pain a good physiotherapist or orthopaedic consultant will be able to help with diagnosis and appropriate treatment.

