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A guide to your tendinopathy pain

This booklet will provide you with up-to-date information about tendinopathy pain and things you can do to help it get better

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Please consult your physiotherapist whilst you are under treatment if you have any questions or queries.

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What is tendinopathy?

Tendinopathy is the term that can be used for any tendon in the body that has become painful and irritated. This can occur with normal daily activates through to high demanding sporting activities.

A tendon is the structure that connects our muscles to our bones, allowing us to move, run, carry items and compete in sport. Tendons are fundamental in keeping us moving and we use them throughout the day.

Common tendons that can become painful

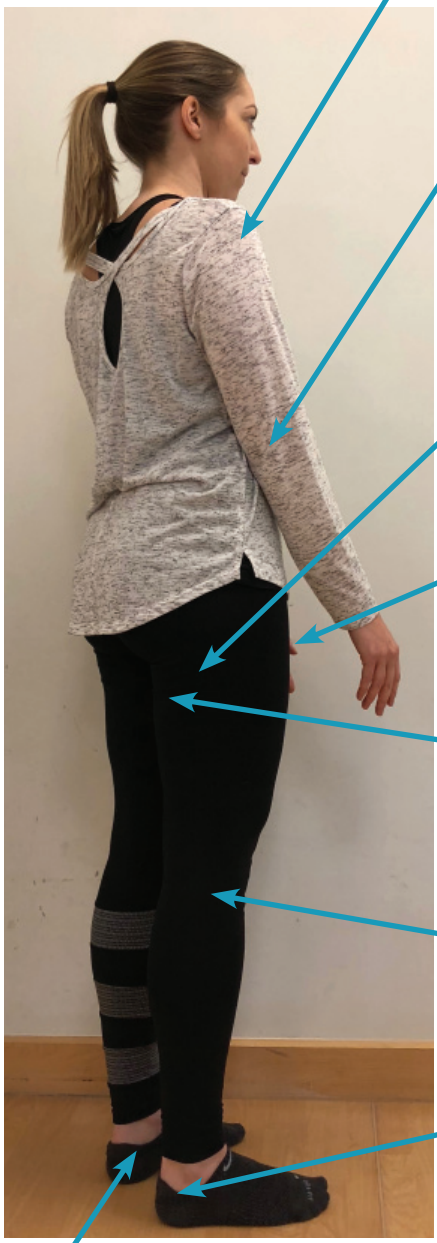
Although we have hundreds in our body, some tendons are more susceptible to becoming painful. Some of the most common sites are:

- Rotator cuff tendinopathy
- Tennis elbow
- Achilles tendinopathy
- Tibialis posterior tendinopathy
- Patella tendinopathy
- Gluteal tendinopathy
- Hamstring tendinopathy
- Adductor tendinopathy

Why is my tendon painful?

There are many associated risk factors that can increase your susceptibility for a tendinopathy, such as weight, age, physical fitness, recent injuries or just the way your bones and muscles are made. However the most common reasons are if something changes in your daily routine or a single event which puts a load on that tendon that it is not used to.

Identifying the cause isn't always as obvious as someone starting to run 5 days a week all of a sudden. It can be a subtle change of duties at work that you may not recognise.


Rotator cuff tendinopathy
Tennis elbow
Gluteal tendinopathy
Adductor tendinopathy (inside of the groin)
Hamstring tendinopathy
Patella tendinopathy
Achilles tendinopathy
Tibialis posterior tendinopathy

Should I rest?

A tendinopathy rarely improves with rest. Rest may help settle your pain down for a short while but rest doesn't promote the body's response to heal the tendon. When returning to activity after rest, normally the tendon will become painful again.

What should I do then?

Exercise is the principal treatment for a tendinopathy and is supported by current research. Tendinopathies need to respond to the load that is put through them during exercise. Our bodies are amazing at adapting and responding to the stress we put on them, but it is important that this is done gradually so the tendons can develop a greater tolerance and keep up with the demand that is put on them.

Modifying load is important and sometimes reducing the amount of stress that is put on the tendon is needed (at least in the short-term). You can discuss the best way to modify your load with your physiotherapist but a basic guide is given at the back of this leaflet.

What exercises should I do?

This can vary greatly and it depends on the amount of load the tendon can take without causing a significant increase in pain. Exercises need to be individualised and based on a person's symptoms, function and goals. Your physiotherapist will guide you through the appropriate exercises specific to you.

Should I stretch?

In certain cases stretching will further irritate your tendon due to an excessive compressive load being put on the tendon. Stretching should only be done under the instruction of your physiotherapist.

When will I be better?

Unfortunately there is no quick fix to a tendinopathy. A tendinopathy will respond slowly to exercise, as it needs time to change and adapt to the continued load it receives. Patience, consistency and commitment is needed. As you progress through your treatment you will be able to achieve more without irritating your symptoms.

Is there any other treatment?

Other treatments have been tried but ultimately exercise is the only treatment that will return your tendon to a healthy state. Massage, injections and electrotherapy have been used for some tendinopathy pain. But there is no evidence to suggest that they address the structural defect of the injured tendon itself. Injections have been shown in some cases to be detrimental to the health of the tendon if injected multiple times.

Pain medication like ibuprofen can help manage tendinopathy pain in certain cases, for example when pain is affecting your sleep or limiting your ability to carry out activities like walking or work duties. It is recommended that you speak to your physiotherapist, pharmacist or GP to discuss pain medication, however pain medication should not be used as a treatment on its own.

Do I need to see a specialist or get a scan?

Tendinopathies can be accurately diagnosed on clinical findings through a thorough assessment by your physiotherapist. Scans cannot always determine the cause of the pain as scans can show findings on those without pain. Therefore a scan that shows ‘severe’, ‘large’, ‘significant’, ‘tears’ does not always equate to pain, loss of function

or necessarily need surgical intervention. A consultant is unlikely to consider any further treatment unless a patient has followed advice with graded exercises provided by a physiotherapist and failed to improve from conservative treatment. A scan can be helpful in exceptional cases to rule out any other possible causes of the pain.

Please note that these are general principles and each tendinopathy will vary, please speak to your physiotherapist for advice and management on your specific tendinopathy and symptoms.

To help guide activity and what you can do to manage your symptoms, use this guide. Some tendinopathies can take up to 48 - 72 hours to respond to the load that has been put on them.

Am I doing too much?

		
Stimulating	**Possibly irritating**	**Definitely irritating**
0 - 3 /10 pain	4 - 5/10 pain	6 - 10/10 pain
Mild	Moderate	Severe
Continue and progress	Reduce to previously tolerable level	Stop, let symptoms settle and resume at lower intensity

Your exercises

If you need help to understand this leaflet or would like it in a different language or format such as large print, Braille or audio, please ask a member of staff.

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