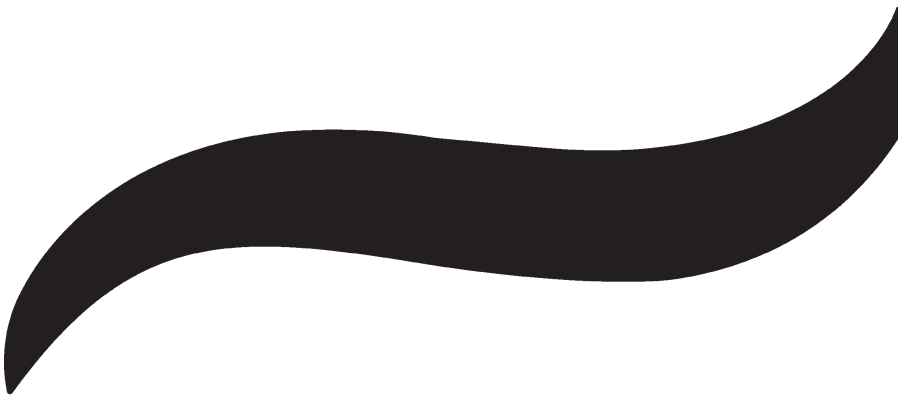




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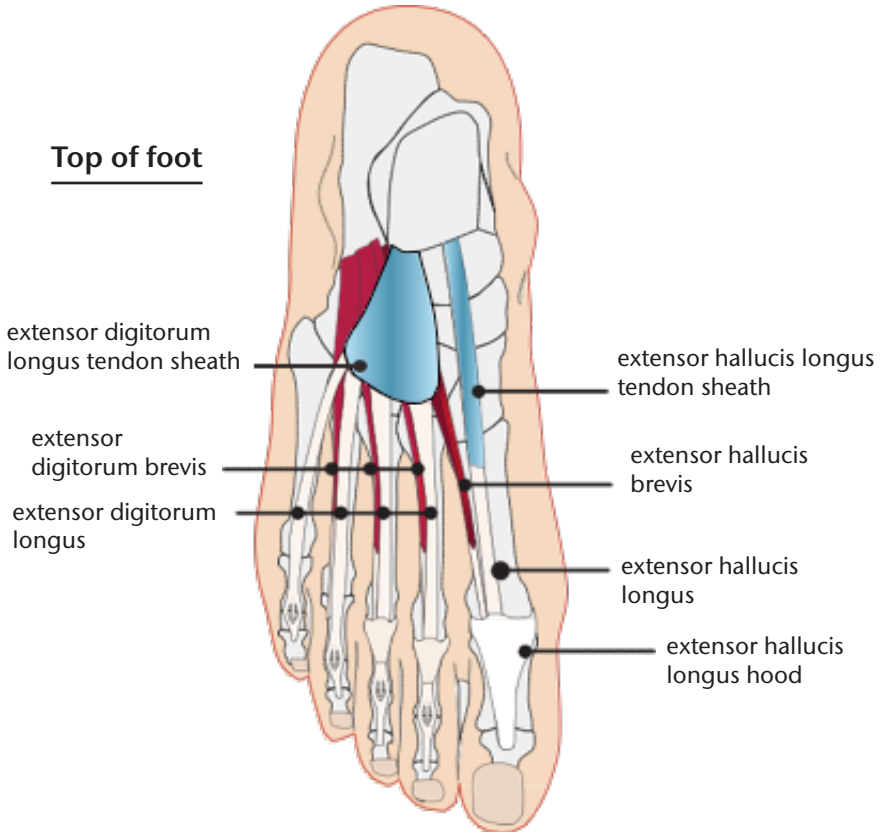
# Extensor Tendinopathy

Physiotherapy Department



# EXTENSOR TENDINOPATHY

Extensor tendinopathy is a condition involving one or more of the tendons that run along the top of your foot. These tendons attach to muscles that lift your foot up and help the foot clear the ground when you walk. If these become overworked they may become painful and swollen.



Treatment for extensor tendinopathy in the early stages usually begins with exercises you can do at home.

**If you cannot pull your toes up at all or with great difficulty or there is numbness present, seek an immediate appointment with your GP.**

## WHAT ARE THE EXTENSORS?

The extensors muscle group are found on the front of the leg and ankle with their tendons running down along the top of the foot, inserting into different areas in the foot. The tibialis anterior is the main muscle which lifts the ankle and it also helps to turn the ankle in. These muscles are mainly active when the foot is swinging to lift the ankle/toes to stop the foot catching the ground and to control your foot as it lands.

### Classic signs and symptoms:

- ❖ Gradual onset of an aching pain at the top of the foot
- ❖ Pain around the front of the ankle and lower leg where the tendon runs
- ❖ Swelling at the top of the foot
- ❖ Pain increases with activity
- ❖ Pain may be made worse by wearing shoes, especially if they are too tight

# WHAT CAUSES EXTENSOR TENDINOPATHY?

It is thought to be caused by repetitive stress and small injuries to the fibres within the tendon as a result of a sudden increase in activity. Repetitive stress and small injuries cause the normal healing response of the soft tissues to slow resulting in injuries occurring within the tendon at a rate faster than the body can heal them. This can then lead to weakening of the tendon. A weakened tendon can be more vulnerable to injury. Weakness within the muscle puts more strain on the tendon.

## Other contributing factors

- ❖ Age - as we get older our tendons become weaker.
- ❖ Being overweight
- ❖ Diabetes has been linked to increased risk of developing extensor tendinopathy
- ❖ Inflammatory conditions i.e. rheumatoid arthritis, psoriatic arthritis etc.
- ❖ Weakness in the muscles within your feet or legs
- ❖ Tightness of the muscles in the backs of your legs
- ❖ Wearing ill-fitting footwear can cause irritation and increased pressure over the top of the foot. Ensure you are not tying your laces too tight
- ❖ Spending long periods standing, walking or running, especially with a sudden increase in these activities
- ❖ Poor exercising or training techniques resulting in overloading or overuse of the extensor muscles
- ❖ Not allowing adequate recovery time between activities

- ❖ Prolonged use of oral corticosteroids and antibiotics (Fluoroquinolones)
- ❖ Previous foot and ankle surgery/trauma
- ❖ Smoking

## **WHAT CAN I DO TO HELP?**

There is no quick or easy fix and your symptoms will not improve overnight. The advice below is focused on helping you get back to normal activity. Most peoples' symptoms will improve but as tendons can be slow to heal, it may take several months to get better.

It is important to remember that if you have any of the above contributing factors you will need to consider making the necessary changes to your lifestyle to help your recovery.

The way in which you manage the load through the tendon will be key to healing process. You must reduce the load by increasing the strength of the tendon and then gradually build up the muscle/tendon to get back to where you were previously before your symptoms.

The one person who can help you get better is you.

## WEIGHT MANAGEMENT

A good indicator of whether you need to lose weight is your body mass index (BMI). You can check this here:

<https://www.nhs.uk/live-well/healthy-weight/bmi-calculator/>



If your BMI states you are overweight or obese it is likely that losing weight will reduce your symptoms. Carrying extra fat also increases your risk of heart disease, stroke, type 2 diabetes, and some cancers. Reducing your portion sizes and eating a balanced diet can be helpful in reducing weight. Click on this link for NHS informs online free 12-week weight management programme to get you started right away.

<https://www.nhsinform.scot/healthy-living/12-week-weight-management-programme#Week1>

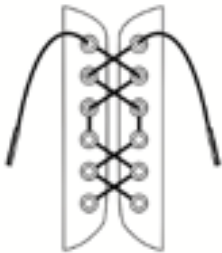
If you need a little more help and feel that you would benefit from working with others in group sessions NHS Lanarkshire's Weigh to Go programme will help you become more active, eat well and lead a healthier lifestyle. Follow this link for Weight-to-go groups in North and South Lanarkshire

<https://www.nhslanarkshire.scot.nhs.uk/weigh-to-go/>

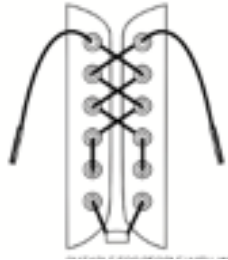
## FOOTWEAR

Avoid wearing hard, flat or unsupportive footwear. Very flat shoes may aggravate your symptoms especially if you also have tight calf muscles. It is important to note that shoes that have flexible soles generally offer the foot less support and can increase the stress in the soft tissues of your foot and ankle. If your footwear has shoelaces makes sure they are tied correctly.

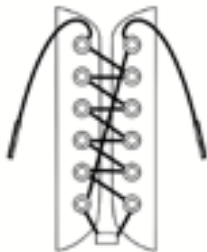
**The extensors can become irritated by shoe laces.** If you are experiencing this try one of these alternative ways of lacing the shoe below.



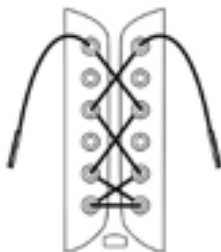
Suitable for people with **high arches**



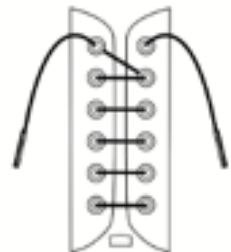
Suitable for people with **wide forefoot**



Suitable for people with **toe pain**



Suitable for people with **wide feet in general**



Suitable for people with **too tight on top**

## PAIN MANAGEMENT

Analgesia also known as pain relief can be an important part in helping you manage your symptoms and allow you to stay active.

Taking the right kind of pain relief regularly allows you to move more normally and continue your usual activities without causing any damage. Pain relief won't always stop your pain completely. For this reason we use the term pain relief (A 30-50% reduction in pain would be a good success).

Pain relievers/ anti-inflammatory medications can be used as advised by your GP or Pharmacist. If you feel the ones you usually take are not helping your pain or you have any side effects from your medicines, please speak to your GP or pharmacist.

## ACUTE INJURY MANAGEMENT

### **POLICE - Generic Advice for acute injuries**

**POLICE** stands for: Protection, Optimal Loading, Ice, Compression and Elevation. It is used to help many injuries and conditions for the first 1 to 3 days.

- ❖ **Protection** and relative rest are advised immediately after injury for the first 1 to 3 days
- ❖ **Optimal loading** refers to having a balanced rehabilitation program which encourages early and gradual activity to improve recovery. How you progress will vary from person to person depending on the injury. It is about finding the injured areas happy place and increasing slowly and gradually



- ❖ **Ice** may be used for reducing pain and swelling. There are safety points to follow when you use ice:
- ❖ Don't ice over a numb area or open wound. If the skin is numb you won't notice if you're developing an ice burn and ice on an open wound can increase the risk of infection
- ❖ Be wary of ice burns – don't apply ice directly to the skin, wrap an ice pack in a clean, damp tea towel before applying. Avoid prolonged exposure to ice, 10-20 minutes is usually adequate

### Application

- ❖ Apply crushed ice/frozen peas wrapped in a damp towel for 10-20 minutes, 2-3 times per day for the first 5-7 days post injury.
- ❖ **Stop applying ice if there are any bad effects such as increase in pain or swelling or skin soreness.**
- ❖ **Compression and Elevation** are helpful for reducing inflammation and swelling. This can be done by keeping your sore area raised on a pillow and compressed by wrapping a bandage around it. **Do not make the bandage too tight and do not wear tubi-grip or any compression bandage in bed at night.**

**Heat:** After 2-3 days, you may find that heat is more relaxing.

You could use a heat pad or a hot water bottle with an insulated cover on it. Make sure this is not too hot and is not directly touching your skin. You should do this for 10 to 15 minutes, 3 to 4 times a day.

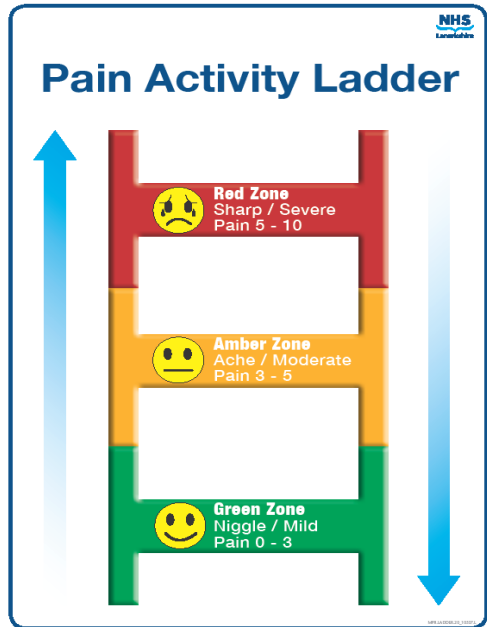
## Pacing and Spacing

- ❖ Pacing and spacing can help you manage your pain better
- ❖ Pacing is the term used for breaking down an activity or task. This can be done by taking regular breaks. Prioritising daily activities can also help. This can prevent “over stimulating” your pain system
- ❖ When completing challenging tasks or activities, it may be useful to set a “baseline”. This is the amount you can manage on a good or bad day without increasing your symptoms. Therefore you can plan rests and set achievable goals

## Pain activity Ladder

By following the pain activity ladder which can be seen below, you can identify activities that you would consider severely painful, moderately painful and mildly irritating and act to change your habits.

- ❖ The pain scale, most often used in medicine, measures pain from 0-10 (zero being no pain and 10 representing the worst pain you could imagine)
- ❖ If you can identify the level of pain you are experiencing, you will find out if you are in the green, amber or red zone. The best way to move down to the green zone is by pacing and spacing your activity
- ❖ When you are completing your rehabilitation exercises it is often best to work within the green and sometimes amber zones both during the exercises and within 48 hours of completing your exercises. If you find yourself in the red zone you are likely pushing yourself too hard and may flare up the pain



After 48 hours:

- ❖ Try to weight-bear more, walking with a limp is generally normal in this phase, exercise can help relieve pain
- ❖ Do whatever you normally would and remain at work, or return to work
- ❖ Avoid sports or heavy lifting until you have less discomfort and improve movement

If you are in pain do not try and do all your normal daily activities such as housework, at once. Break the harder jobs down into smaller time frames and do something gentler in between. Extensive walking or standing should be avoided if it aggravates your pain. It is recommended to modify activities rather than to fully stop all forms of movement or exercise so try swimming or cycling instead of walking or running.

Avoid high impact activities like running which will significantly increase load through the Peroneal tendon, we would encourage you to participate in low impact activities like walking, swimming, cycling etc.

## **STRENGTHENING EXERCISES**

Please begin with the early exercises and then progress to the middle and late exercises when you feel able.

### **1. Early strengthening**

In lying or sitting with legs straight out in front of you. Pull toes of affected foot towards you and place heel of other on top of foot just below the toes and press feet together. Hold for 5 seconds and repeat 5 to 10 times. Do this exercises 3 times a day.



## 2. Early Movement

Sitting with your legs straight out in front of you. Pull toes towards you until you feel a slight stretch in your calf muscle then slowly release foot back to starting position. Repeat 10 times and do this 3 times a day.



## 3. Early Movement

Sit towards the front of a chair. Keeping your feet slightly in front of your knees, gently lift your toes, keeping your heels in contact with the ground. Once you have lifted your toes as far as you can slowly lower them back to the ground. Repeat this exercise 10x and do this 3 times a day.



## 4. Middle Strengthening

Stand with you back against a wall with your feet around

6 inches from the wall and your knee bent slightly. Lift your toes up off the floor transferring your weight on to your heels. Slowly lower to starting position. Repeat 10 times and do this exercise 3 times a day.



## **5. Late Balance**

Walk on your heels for around 30 seconds. Keeping your toes up of the floor. You can hold on to a wall or kitchen worktops if you feel unsteady. Repeat 3 times as able, stop if you feel ankle feels tired or shaky. Try to do this exercise 3 times a day.



### **WORK**

We know that staying in work or returning to work as soon as possible is good for your mental and physical health

If you have problems with activities at work, it may be helpful to ask for a workstation/workplace assessment or talk with your manager or Occupational Health Department. This can help with alterations or provision of equipment or altering your working day or tasks.

There are organisations which can support you at work or help you return to work – you can ask your physiotherapist or Occupational Therapist for information.

## SMOKING

Smoking can affect how your body recovers from musculoskeletal problems. If you smoke then the good news is that by stopping smoking it can improve your health in many different ways. Giving up smoking is not something you have to do on your own. You're twice as likely to stop smoking successfully if you get the right support from the NHS. There is a free NHS stop smoking service available in Lanarkshire to help you succeed:

<https://www.nhslanarkshire.scot.nhs.uk/services/quit-your-way/>

### TIMESCALES

There is no overnight cure for this condition. However, most people with extensor tendinopathy symptoms improve within 6 to 12 weeks of following this advice.

Unfortunately, not everyone will improve quickly and for some it could take six to nine months of focused rehabilitation to make a pain free return to full activities.

It should be noted that it is normal to have periods of increased pain or flare ups during your recovery.

## WHAT ELSE CAN BE DONE?

If you have followed the above advice for the recommended 6 to 12 weeks and your pain has not started to improve, a self-referral to physiotherapy can be made on our website <https://www.nhslanarkshire.scot.nhs.uk/services/physiotherapy-msk/> or via your GP

If your symptoms continue to worsen or do not show signs of improvement after a period of 6-12 weeks of following the advice above, a self-referral to physiotherapy can be made on our website:

<https://www.nhslanarkshire.scot.nhs.uk/services/physiotherapy-msk/> or via your GP.



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Notice on our website at [www.nhslanarkshire.scot.nhs.uk](http://www.nhslanarkshire.scot.nhs.uk) or ask a member of staff for a copy of our Data Protection Notice.

**NHS inform** - The national health information service for Scotland.  
[www.nhsinform.co.uk](http://www.nhsinform.co.uk)  
Tel No: 0800 22 44 88

If you need this information in another language or format, please contact the NHS Lanarkshire General Enquiry Line on 0300 3030 243 or e-mail [info@lanarkshire.scot.nhs.uk](mailto:info@lanarkshire.scot.nhs.uk)

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