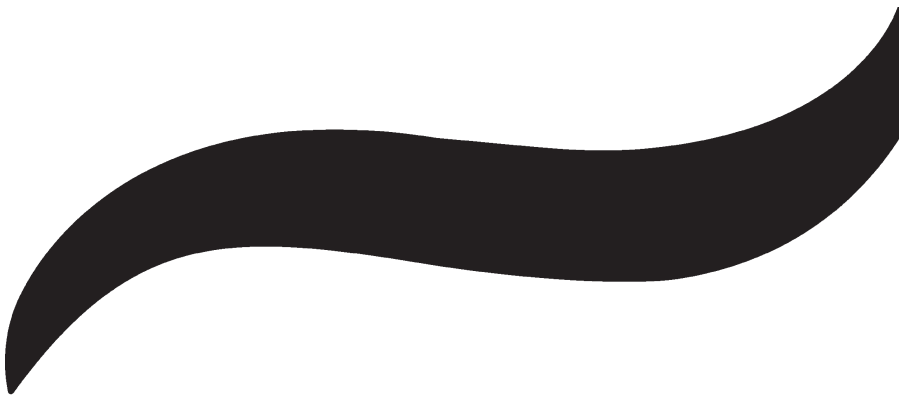




Information about

Posterior Tibialis Tendinopathy

Physiotherapy



POSTERIOR TIBIALIS TENDINOPATHY

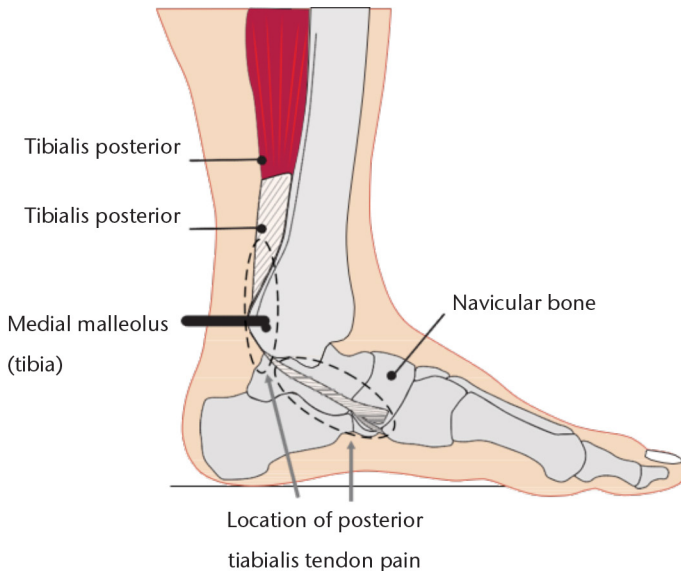
Posterior Tibialis Tendinopathy is a progressive condition which starts with pain and inflammation around the inside of your foot, specifically around your instep/arch and the inside of your ankle.

If left untreated, it can lead to significant deformity of the foot and ankle.

The condition affects between 3.3% - 10% of the population. It is more common in women aged between 40-50 years and usually affects only one foot. You may find this pain increases with running, jumping or even walking.

WHAT IS THE POSTERIOR TIBIAL TENDON?

The posterior tibial tendon is important in supporting the arch of your foot during weight bearing activity.



Classic signs and symptoms:

- ❖ Pain around the inside of the ankle and lower leg where the tendon runs. This is often sore if you apply pressure to the area with a finger
- ❖ Pain on performing a single leg heel raise. Mild weakness on single heel rise – unable to go right up onto your tip toes
- ❖ The tendon is inflamed with pain and swelling
- ❖ Pain during walking, running or jumping with symptoms easing at rest

WHAT CAUSES POSTERIOR TIBIALIS 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 tissue to slow. This can result in injuries happening 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 posterior tibialis 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 unsupportive footwear such as sandals
- ❖ 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 posterior tibialis muscle
- ❖ Not allowing adequate recovery time between activities

- ❖ Long term use of oral corticosteroids and antibiotics (fluoroquinolones)
- ❖ Previous foot and ankle surgery/trauma
- ❖ High impact sports
- ❖ 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 note that if you have any of the above contributing factors, you will need to consider making the necessary changes to your lifestyle to help aid 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 AS APPROPRIATE

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.

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.



FOOTWEAR

Changing to comfortable running style trainers/ shoe or hiking boots with a slight heel will provide the best support for the posterior tibial tendon.

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 appropriately.

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 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.
- ❖ 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.
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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

SHOULD I USE A HEAT PAD?

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.

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 improved 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 Achilles tendon, we would encourage you to participate in low impact activities like walking, swimming, cycling etc.

WHAT DO I DO IF MY SYMPTOMS FLARE UP?

Flare ups of pain are common. This is when your pain suddenly becomes very bad for a time.

Some people have a lot flare ups of pain so it is important to know how best to manage these flare ups. In most cases a pain flare-up will settle within 6 weeks.

TOP TIPS

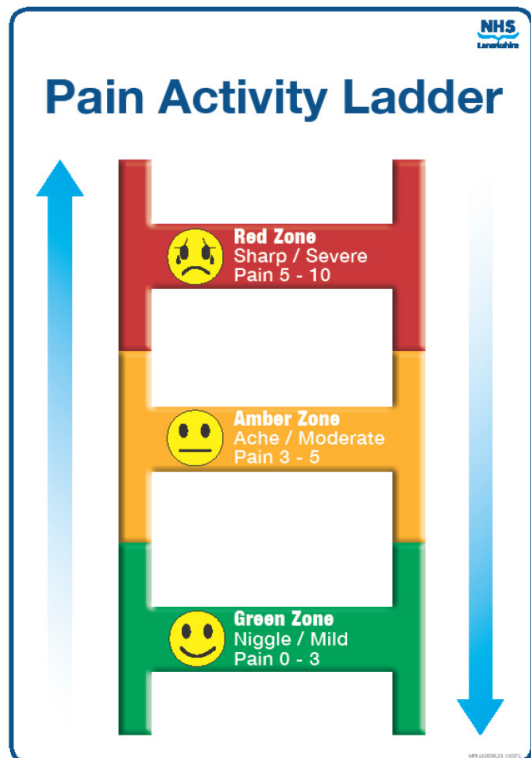
- ❖ You will likely find it helpful to rest a bit more but it is still important to keep active. This will help to avoid becoming stiff and your muscles becoming weak
- ❖ If you aim to get a balance between rest and activity it should help your pain to settle down. You may be sore at first, however, start slowly and gradually increase the amount you do
- ❖ Reduce movements or tasks that make your symptoms worse. This can help especially in the early days
- ❖ Finding positions or movements that reduce your pain can be useful

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 healthcare, 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 have, 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 doing your rehabilitation exercises it is often best to work within the green (and sometimes amber zones depending on what you think is an acceptable level of pain) both during the exercises and in the next 2 days. If you find yourself in the red zone you are likely pushing yourself too hard and may make the pain worse again



POSTERIOR TIBIALIS STRENGTHENING EXERCISES

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

1. Early strengthening

Sitting with legs out in front of you. Place the big toes of both feet together. Gently press your big toes together and hold for 5 seconds.

Repeat 5 to 10 times and try to do this 3 times a day.



2. Early strengthening

Sit towards the front of a chair. Keeping your feet directly underneath your knees, gently push up onto your toes keeping them in contact with the ground. Once you have lifted your heels as far as you can slowly lower your heels back to the ground.

Repeat this exercise 10 times and do this 3 times a day. Once this exercise feels easy you can add a bit of resistance by leaning forward onto your knees through your hands.



3. Middle strengthening

Stand holding on to a kitchen worktop or back of a chair. Slowly push up on to your toes, shifting weight forward on to your toes and then return to starting position.

Repeat this exercise 10 times and do this 3 times a day.



4. Middle Balance

Stand holding on to a support such as a kitchen worktop or chair. Lift your unaffected leg up off the ground and aim to stand on your affected leg for as long as you can, stop at 30 seconds.

Repeat 3 times as able, stop if you feel ankle feels tired or shaky.

Try to do this exercise 3 times a day.



5. Late Strengthening

As your balance and strength improves you might feel capable of standing on one leg as you push up onto your toes. Remember to hold on to a support. Slowly lift your heel as high as you can taking weight onto your toes and then return to the starting position.

Repeat this exercise 10 times and try this 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

Have patience. There is no overnight cure for this condition however, most people with Achilles tendinopathy symptoms improve within 6 months of following the recommended advice, however, symptoms can take up to 1 year to improve in some people. 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?

Treatment for Posterior Tibialis Tendinopathy in the early stages usually starts with exercises that you can do at home. However, 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.

If you notice any changes in the shape of your foot due to this pain or are unable to perform a single leg heel raise please contact GP or NHS 111.



SCAN ME

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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In collaboration with
NHS Lanarkshire
podiatry department.



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