

Extracorporeal shockwave therapy for Achilles tendinopathy

Information for the public

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What has NICE said?

There is not much good evidence about how well extracorporeal shockwave therapy for Achilles tendinopathy works, however there are no major safety concerns. It should only be used if extra care is taken to explain the risks and extra steps are put in place to record and review what happens.

More research on extracorporeal shockwave therapy for Achilles tendinopathy is needed and NICE may look at it again if more evidence is published.

What does this mean for me?

Your health professional should fully explain what is involved in having this procedure and discuss the possible benefits and risks with you. In particular, they should explain the uncertainty about the evidence on how likely it is to improve your symptoms. You should also be told how to find more information about the procedure. You should only be asked if you want this procedure after having this discussion. Your health professional should ask you if details of your procedure can be collected.

Other comments from NICE

NICE said that comments from patients were mixed. Some people had less benefit from the procedure than others, and some people found the procedure painful.

The condition

Achilles tendinopathy is pain and inflammation of the tendon at the back of the heel. It is usually caused by injury or overuse. Symptoms include pain, swelling, weakness and stiffness, and tenderness over the heel.

Tendinopathy usually gets better either on its own or with the help of rest, applying ice and treatments such as corticosteroid injections, orthotics (foot support devices), physiotherapy, physical exercises or stretching and pain relief medications. If these don't work, surgery may sometimes be considered. NICE has looked at using [extracorporeal shockwave therapy](#) as another treatment option.

[NHS Choices](#) may be a good place to find out more.

The procedure

In extracorporeal shockwave therapy, a device is used to pass acoustic (sound) shockwaves through the skin to the affected area. This is thought to stimulate healing, but it is not known how this works.

There are low-energy and high-energy devices available. High-energy devices may cause more pain, needing local anaesthetic. There is some evidence that local anaesthetic may reduce the benefit of the procedure. Low-energy devices cause less pain, can be used repeatedly and doesn't need local anaesthetic. Many patients have a series of treatments but it may be a single session. Ultrasound guidance may be used to help position the device.

Benefits and risks

When NICE looked at the evidence, it decided that there was not enough evidence to know how well extracorporeal shockwave therapy works for Achilles tendinopathy. The 5 studies that NICE looked at involved a total of 821 patients.

The evidence on how well the procedure works is not clear because the way it was done, and how its success was measured, was different in each study. But some patients in the studies reported less pain and better function, up to 1 year after the procedure was done.

The studies showed that the risks of the procedure included skin reddening, bruising, pain, calf ache and numbness. These were all temporary symptoms that got better with time. In 2 patients the

Achilles tendon broke 2 weeks after the procedure, but this can also happen when the procedure has not been used.

If you want to know more about the studies, see the [guidance](#). Ask your health professional to explain anything you don't understand.

Questions to ask your health professional

- What does the procedure involve?
- What are the benefits I might get?
- How good are my chances of getting those benefits? Could having the procedure make me feel worse?
- Are there alternative procedures?
- What are the risks of the procedure?
- Are the risks minor or serious? How likely are they to happen?
- What care will I need after the procedure?
- What happens if something goes wrong?
- What may happen if I don't have the procedure?

About this information

NICE [interventional procedures guidance](#) advises the NHS on the safety of a procedure and how well it works.

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