Does shockwave therapy lead to better pain and function than sham over 12 weeks in people with insertional Achilles tendinopathy? A randomised controlled trial

Question

Can zapping your heel with sound waves ease the pain of a stubborn Achilles tendon injury?

What is the problem?

For athletes and active folks plagued by nagging heel pain, healthcare providers are testing if zapping the Achilles tendon with special sound waves can bring relief when other treatments haven't worked.

How did the team study the question?

Researchers randomly assigned 76 people with stubborn heel pain to receive either real or fake sound wave treatments on their Achilles tendon, along with exercise, and then compared their pain and function over 12 weeks.

What did the team find?

The study found that zapping the Achilles tendon with sound waves didn't help more than fake treatments. After 12 weeks, people who got real sound wave therapy had about the same amount of pain and ability to move as those who got fake treatments. Both groups improved somewhat, but there was no real difference between them. The researchers concluded that adding sound wave therapy to exercise doesn't seem to offer any extra benefit for healing stubborn Achilles tendon pain.

How can this research be used?

This study shows that expensive sound wave therapy probably isn't worth it for treating stubborn heel pain. Healthcare providers and physical therapists can use this information to avoid recommending unnecessary treatment to their patients. Instead, they can focus on proven methods like exercise programs, which seem to work just as well on their own. This helps patients save money and time by skipping treatments that don't provide extra benefits. Insurance companies and healthcare systems can also use these findings to make smarter decisions about which treatments to cover or offer, potentially reducing healthcare costs for everyone.

Cautions

This study had a few weak points to keep in mind. First, even though the fake treatment wasn't supposed to hurt, it still caused some pain, which might have affected the results. Second, the healthcare providers giving the (zapping) treatments knew which patients got real or fake therapy, which could have influenced how they acted. Third, the researchers weren't sure exactly how much energy the sound waves delivered to the tendon, so it's hard to know if they used the right amount. These issues mean we should be careful about drawing firm conclusions from this study alone, and more research might be needed to be really sure about the findings.

Citation

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