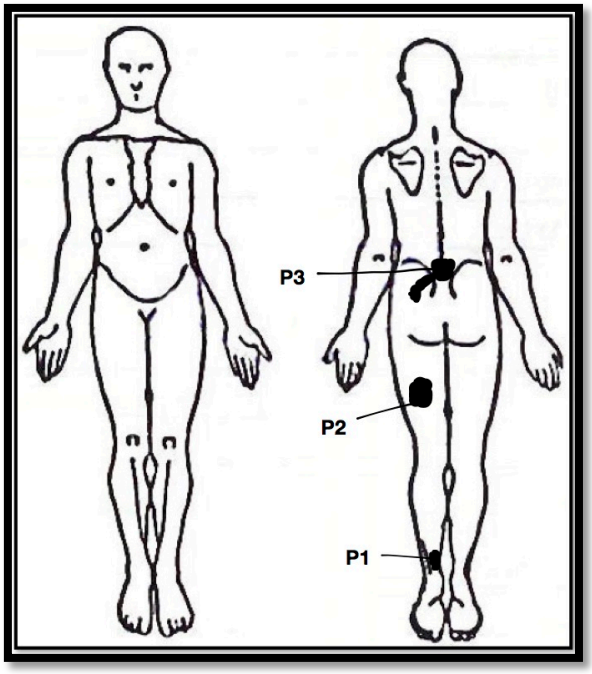
A 37-year-old male family physician presents with a 6-month history of pain in the mid section of his left Achilles tendon **(P1).** The onset occurred after sprinting a few hundred metres in flat soled shoes. There is no pain at rest. The pain occurs when walking quickly, especially uphill, or if he tries to run when playing Ultimate Frisbee. He has stopped playing for this reason. He is anxious to return to Frisbee as it is his only aerobic activity and he is concerned about gaining weight. He misses training and is losing hope that he will be able to compete at Ultimate Nationals in 3 months. He misses spending time with his Frisbee friends. He is spending his leisure time sailing. He initially received 20 physiotherapy treatments consisting of ultrasound and interferential current which gave him temporary relief. His condition plateaued 4 months ago.

He has had 3 left hamstring strains in the past 5 years that resolved in 2-4 weeks with rest and self–prescribed NSAIDs. He has had tight hamstrings for years and is usually able to manage to play Frisbee without problems as long as he warms up and stretches frequently throughout the game. Since he stopped playing and stretching, his left hamstring feels tight and a bit uncomfortable **(P2)** when he gets up from prolonged sitting or if he has to run across the street.

He has had some central/bilateral lower back pain which can spread to the left buttock **(P3)** for the past 10 years since a sailing race when he was bent forward for 3 hours. He describes P3 as a painful tightness reproduced with sitting and charting for prolonged periods of time. When he was able to play Frisbee, he experienced lower back pain after the game getting out of his car (3/10) and had lower back stiffness for 10 minutes upon waking the next day. He is not concerned about his low back pain as he is pain free while on his feet most of the day. He has not sought treatment for this.



BEHAVIOUR OF SYMPTOMS:

P1: intermittent sharp pain in the middle 1/3 of left Achilles tendon, 0/10 at rest
↑: begins immediately with the first few steps, getting out of bed or after sitting for 15 minutes (6/10) but within 2 minutes this reduces (1/10); walking on flat surfaces for 30 minutes (4/10); walking quickly, uphill, short runs (7/10).
↓: rest i.e. sitting or lying, reduces (0-1/10) in 15 min or less; NSAIDs before bed slightly decreases pain with the first few steps in the morning (4/10).

P2: intermittent posterior thigh tightness and discomfort, 0/10 at rest
↑: after sitting > 30 minutes, the first 10 steps of walking are 3/10; running across the street if the light is about to change (4/10)
↓: stopping the pain provoking activity; settles in a few minutes (0/10)

P3: intermittent central and bilateral lower back pain which can spread to the left buttock, 0/10 at rest
↑: prolonged sitting >45 minutes (2/10); spreads to the left buttock after sitting > 2 hours (3/10)
↓: walking and changing positions; lying down in any position; settles in 15 minutes (0/10)

Over 24-hour period:

AM (upon waking):
P1: 0/10 in bed but 6/10 for first 2 minutes of walking then reduces to 1/10
P2: 0/10
P3: 0/10

PM (through the day):
P1: only present at 4-7/10 with the activities described
P2: only present at 3-4/10 with the activities described
P3: only present at 2-3/10 with the activities described; ache at the end of the day if total sitting time > 5 hours

Night: sleeps well

Special Questions and Past History:
Patient denies any unexplained weight loss, fatigue, night pain or sweats, bowel or bladder dysfunction. He currently has no pain with coughing or sneezing but remembers coughing being very painful when he first hurt his back 10 years ago. He is a non-smoker. He drinks socially. He has not seen a doctor because he is a doctor and doesn't feel imaging or other investigations are warranted. At the onset of Achilles pain, he took Celebrex regularly for 2 weeks and it provided

temporary relief. He states he has not missed work and is otherwise healthy, on no medications and has had no hospitalizations.