

Achilles Tendon Surgery

Anesthesia: General with nerve block

Type of Surgery: Outpatient

Length of Procedure: 1-2 hours

GENERAL FACTS

Rupture (tearing) of the Achilles tendon is a common condition that often occurs when there is a sudden contraction of the calf muscle while the foot is pushing off or planted on the ground. Patients often describe the sensation of something or someone hitting the back of the calf. Generally there is associated pain and difficulty or weakness with walking.

Sometimes the tendon can be damaged more chronically, in this case the diseased tendon will need to be removed. If a significant portion of the tendon is removed, the loss of tendon mass will need to be made up with tendon grafts and sometimes tendon transfers. If there significant spurring of the heel bone or a Haglund's deformity, these bony abnormalities will also be removed.

The Achilles tendon acute ruptures can be treated in splint followed by immobilization in a Cast boot or with surgery. Good results can often obtained regardless of approach taken. You and your surgeon will discuss the best option for you.

SURGICAL TREATMENT

Surgery involves making an incision over the region of the Achilles, bringing both ends back together, and suturing them with a heavy suture material. This may require anchors to be placed into the bone and may also require use of donor tissue or tendon. Some bone may also be removed depending on your condition

POSTOPERATIVE INSTRUCTIONS

Day 1

- You will be in a bulky splint. **DO NOT REMOVE THE** dressing
- Elevate above the level of your heart as much as possible
- **DO NOT** put any weight on your foot/ankle
- Use crutches/walker/knee scooter to remain non-weight bearing
- Take your pain medication as directed

0-1 Weeks

- First postoperative visit
- Splint will be removed
- Your incision will be checked for signs of infection
- You will be placed in a boot/cast with heel wedges or back into your splint depending on the condition of the wound

2-4 Weeks

- Your sutures will be removed
- You will be placed in a walking boot but continue non-weight bearing
- You may start gentle range of motion exercises

4 weeks

- Physical therapy started per protocol

- Weight bearing advanced in boot without use of crutches or scooter
- Heel wedges will be removed slowly

6 weeks

- Discontinue all wedges and begin weaning out of the boot
- No barefoot walking
- Continue PT per protocol

8 weeks

- Discontinue the boot
- No barefoot walking, use supportive gym shoe for weight bearing
- Possible need for heel lift in sneaker

12 weeks

- Advance to higher level activities with physical therapy

CALL YOUR DOCTOR IF:

- You feel calf pain, shortness of breath, nausea or chills.
- You get your bandage wet.
- You have side effects such as a rash.
- You have bluish or cold toes.
- You have a temperature over 100.5 degrees F
- You fall or injure your surgical foot