ACHILLES TENDON REPAIR POSTOPERATIVE REHABILITATION PROGRAM



Background

Achilles tendon repair is performed after injury occurs to the Achilles tendon. The injury is often accompanied by an audible and palpable pop, with limited ability to push off of the injured limb. Recovery is expected to take between 6 to 9 months, and return to athletics may take 9-12 months depending on the severity of injury and nature of sport.

Summary of Recommendations

Risk Factors	 Exceeding ROM goals Age (30-50 years) Male Fluoroquinolone use
Precautions	 Weight bearing in protective boot after initial postoperative followup Neutral ankle weight bearing by week 6
Criteria for Discharge	 Discontinue boot: may transition to shoe after patient progresses to neutral weight bearing without limp Return to Running: 95% symmetry with Range of motion, calf circumference Return to Sports: 90% symmetry single leg hop testing

Rehab Protocol

Phase I-protection

Weeks 0-2	 Maintain splint Non-weightbearing Goal: reduce edema, protect incision, prevent DVT
-----------	---

Phase II-return to walking

Weeks 2-6	 Begin walking Walking boot, heel lifts (wean 1 left every 2 weeks as tolerated) Mobility Active ROM up to 15° plantar flexion without boot Initiate ankle strengthening in protected position After 2 weeks Isometrics in all planes Active plantar flexion up to 15° Sitting heel raises—no weightbearing 4 way straight leg raise Bicycle in boot BAPS as tolerated, beginning in seated position
-----------	--

 Seated heel raise with light weight Initiate balance/proprioception training on stable surface once patient can bear weight in neutral Leg press May initiate soft tissue mobilization after wound is healed Pool therapy may begin at week 4 if wound healed 		 Initiate balance/proprioception training on stable surface once patient can bear weight in neutral Leg press May initiate soft tissue mobilization after wound is healed
---	--	--

Phase III-strength progression

Weeks 6-12	 Wean off boot, initiate walking in shoe/neutral heel position Use of heel wedges (<2) in shoe as needed Initiate weight bearing strengthening exercises Exercise progression Calf raise progression: 2 leg in neutral, single leg in neutral, 2 leg in dorsiflexion, single leg in dorsiflexion Continue BAPS for ankle ROM Closed chain hip/knee strengthening as tolerated Initiate balance training on unstable surfaces
------------	---

Phase IV-return to sport

Week 12 and beyond	 Criteria for initiating return to running 5 x 25 single calf raises Normal landing mechanics 20 single leg squats 95% symmetry ROM, calf circumference Return to sport 90% symmetry in single leg hop testing Continued progressing of strength and stability exercise on stable and unstable surfaces Sports specific exercise/agility progression
-----------------------	---

References

Mullaney M, et al. Electromyographic analysis of the triceps surae muscle complex during Achilles tendon rehabilitation program exercises. *Sports Health.* November 2011; 3(6): 543-546.

Saxena A, Ewen B, Maffulli N. Rehabilitation of the operated achilles tendon: parameters for predicting return to activity. *J Foot Ankle Surg.* 2011;50:37-40.

Kearney RS, McGuinness KR, Achten J, Costa ML. A systematic review of early rehabilitation methods following a rupture of the Achilles tendon. *Physiotherapy*. 2012;98:24–32.

Calder, J. D., & Saxby, T. S. (2005). Early, active rehabilitation following mini-open repair of Achilles tendon rupture: a prospective study. Br J Sports Med, 39(11), 857-859. doi: 10.1136/bjsm.2004.017509

Carcia CR, Martin RL, Houch J, Wukich DK. Achilles Pain, Stiffness, and Muscle Power Deficits: Achilles Tendinitis Clinical Practice Guidelines Linked to the International Classification of Functioning, Disability, and Health from the Orthopaedic Section of the American Physical Therapy Association. *J Sport and Orthop.* 2010. 40(9) A1-A26

Chiodo, C. P., & Glazebrook, M. (2010). American Academy of Orthopedic Surgeons Clinical Practice Guideline on Treatment of Achilles Tendon Ruptures. Journal of Bone and Joint Surgery, 92, 2466-2468.

Costa, M. L., MacMillan, K., Halliday, D., Chester, R., Shepstone, L., Robinson, A. H., & Donell, S. T. (2006). Randomised controlled trials of immediate weight-bearing mobilisation for rupture of the tendo Achillis. J Bone Joint Surg Br, 88(1), 69-77. doi: 10.1302/0301-620X.88B1.16549 Costa, M. L., Shepstone, L., Darrah, C., Marshall, T., & Donell, S. T. (2003). Immediate full-weight-bearing mobilisation for repaired Achilles tendon ruptures: a pilot study. Injury, 34(11), 874-876. Kangas, J., Pajala, A., Ohtonen, P., & Leppilahti, J. (2007). Achilles tendon elongation after rupture repair: a randomized comparison of 2 postoperative regimens. Am J Sports Med, 35(1), 59-64. doi: 10.1177/0363546506293255

Lansdaal, J. R., Goslings, J. C., Reichart, M., Govaert, G. A., van Scherpenzeel, K. M., Haverlag, R., & Ponsen, K. J. (2007). The results of 163 Achilles tendon ruptures treated by a minimally invasive surgical technique and functional aftertreatment. Injury, 38(7), 839-844. doi: 10.1016/j.injury.2006.12.010

Maffulli, N., Tallon, C., Wong, J., Lim, K. P., & Bleakney, R. (2003). Early weightbearing and ankle mobilization after open repair of acute midsubstance tears of the achilles tendon. Am J Sports Med, 31(5), 692-700.

Ozkaya, U., Parmaksizoglu, A. S., Kabukcuoglu, Y., Sokucu, S., & Basilgan, S. (2009). Open minimally invasive Achilles tendon repair with early rehabilitation: functional results of 25 consecutive patients. Injury, 40(6), 669-672. doi: 10.1016/j.injury.2008.10.033

Sadoghi, P., Rosso, C., Valderrabano, V., Leithner, A., & Vavken, P. (2012). Initial Achilles tendon repair strength-synthesized biomechanical data from 196 cadaver repairs. Int Orthop, 36(9), 1947-1951. doi: 10.1007/s00264-012-1533-6

Strauss, E. J., Ishak, C., Jazrawi, L., Sherman, O., & Rosen, J. (2007). Operative treatment of acute Achilles tendon ruptures: an institutional review of clinical outcomes. Injury, 38(7), 832-838. doi: 10.1016/j.injury.2006.06.005

Suchak, A. A., Bostick, G. P., Beaupre, L. A., Durand, D. C., & Jomha, N. M. (2008). The influence of early weightbearing compared with non-weight-bearing after surgical repair of the Achilles tendon. J Bone Joint Surg Am, 90(9), 1876-1883. doi: 10.2106/JBJS.G.01242

Twaddle, B. C., & Poon, P. (2007). Early motion for Achilles tendon ruptures: is surgery important? A randomized, prospective study. Am J Sports Med, 35(12), 2033-2038. doi: 10.1177/0363546507307503