

Achilles Tendon Repair

Post-Operative Accelerated Rehabilitation Protocol

0-3 Weeks Post Operatively

Fiberglass splint placed on while under anesthetic, in minimal equinus (foot pointing down)

Non weight bearing mobilization with crutches

Regular pain relief as required (E.g. Norco, Ibuprofen)

Keep splint/cast dry.

Strict elevation at the level of the heart, for 23 hours a day for 7 days (for pain relief and wound healing)

Follow up with Dr. DeFrino 10-14 days for wound and removal of sutures

Elevation at the level of the heart, for 12 hours a day for 7 further days, most patients will start aspirin 325 twice daily to reduce risk of blood clots

After 3 Weeks Post Operatively (Post-Operative Week 3)

Cast removed

Rigid walking boot

Start full weight-bearing (as much weight as comfortable) (Early weight-bearing has been shown to statistically improve time to return to activities including work, sports, and normal walking)

Start physiotherapy- at home, including gentle range of motion.

OK to bathe, sleep and range ankle out of boot

Absolutely no weight out of boot

8 Weeks Post Operatively

Assessment of tendon healing, ankle motion, calf power, gait

Discard boot and into a normal shoe full weight bearing

Start formal physiotherapy

3 Months Post Operatively

Assessment of tendon healing, ankle motion, calf power, gait, discuss sporting aspirations

Continue physiotherapy

Start jogging

6 Months Post Operatively

Outpatient visit to see DR. DeFrino

Assessment of tendon healing, ankle motion, calf power, gait, discuss sporting aspirations

Continue physiotherapy if required

Start sports requiring explosive activities

Driving

You need to be able to control the vehicle in an emergency. Can you stamp your foot down on the ground? For left sided surgery and no clutch is required, driving is probably safe at 2 weeks post operatively. For the right sided surgery, driving is probably safe at 9 weeks post operatively, once in a normal shoe. If you are unsure, please ask Dr. DeFrino

Return to Sport

There is a lack of evidence to recommend specific timings for returning to sport. A decision should be made with in consultation with Dr. DeFrino and your physiotherapist. Above timings are guidelines only

Rehabilitation Guide

Post-Operative Week 3

Out of boot, passive range of motion, active plantar flexion

Post-Operative Week 5-8

Active plantar flexion with Theraband

Seated heel raises

Out of boot: Full plantar flexion, inversion and eversion, limit dorsiflexion to number of heel raises in degrees

Proprioception/balance, Gait re-education

Post-Operative Week 8 onward (boot discarded)

Gentle weight bearing dorsiflexion stretch (lunge position)

Eccentric/Concentric loading (bilateral to single. Emphasize eccentric phase)

Single stairs

Progress to upslope and downslope

NWB aerobic exercises- e.g. cycling (push with heel, not toes)

Monitor inflammation signs and rehabilitation accordingly

Discard crutches (if still needed) when dorsiflexion 10°

3 Months Post Operatively

Jogging progressing to fast acceleration & deceleration

Directional running/ cutting

Plyometric e.g. toe bouncing upwards/forwards/directional

