

Insertional Achilles Tendinosis Surgery

What is insertional Achilles tendinosis?

Insertional Achilles tendinosis is a progressive condition that occurs where the Achilles tendon attaches to the heel bone. Some may call this tendinitis/Haglund's lump/ pump bump disease.

The bony enlargement at back of heel causes pressure on bursa leading to its inflammation (Bursitis) and pain.

What are the symptoms?

- A noticeable bump on the back of heel.
- Pain in the area where the Achilles tendon attaches to the heel.
- Swelling and redness in the back of the heel

What treatments are available?

Non-operative measures include medications, shoe modifications, ice, exercises, heel lifts, physical therapy and orthotic devices.

If not improved by above mentioned measures, Surgery is indicated in symptomatic cases.

What does the operation involve?

Surgery involves removing the damaged portion of the Achilles tendon and maintaining tendon attachment to the heel bone. Sometimes a small amount of tendon can be removed, leaving the remaining Achilles tendon attached to the heel bone.

In cases where the damage is more involved, the entire Achilles tendon may need to be removed from the heel bone and the remaining good tendon reattached using anchors. In these cases tendon transfer using another tendon may be necessary.

Is it painful?

Whilst you are in hospital the nursing staff will give you pain killers as required and prescribed. When you are at home you may find Paracetamol or Ibuprofen (if tolerated) useful for controlling any pain. Instructions on management of pain will be given by the nursing staff before you leave the hospital.

How long does recovery take? / What happens after surgery?

Most patients go home the same day or stay overnight. You will have a “plaster backslab” and will not be allowed to weight bear for 6 weeks. Your back slab and wound dressings will be changed and stitches removed (if applicable) during your follow-up appointment, which is usually 2 weeks after the operation. At this stage you will be given a non-weight bearing fibre cast for another 4 weeks.

At 6 weeks your plaster will be removed, you will be given an air cast brace and referred to physiotherapy which continues for another 4 weeks. Over the next six weeks, you will gradually increase your activity, whilst wearing the brace.

After 12 weeks, if rehabilitation has gone well, you may return to sport, initially wearing the brace. It is not unusual to wait up to six months after surgery to return into contact sports.

Swelling is quite common after surgery and this is best managed by elevating the foot at regular intervals. Patients having had the left ankle operated on will be able to drive an automatic car within two weeks. Those who have had an operation on the right side will be able to drive after about 6-8 weeks. You are advised not to fly after surgery for about six weeks. Swimming will be possible after plaster comes off.

Please follow “Precautions following Surgery” as mentioned elsewhere on this website.

When can I go back to work?

This will depend on the type of work you do. If you have a desk job, you should be able to return to work with your foot up in the boot or plaster after 2-4 weeks. If on the other hand you do manual work, you may need up to 8 weeks off work.

What can go wrong?

All operations have an inbuilt risk and complication rate. The risks for Insertional Achilles Tendinosis Surgery are as follows:

- Infection
- Nerve injury (causing numbness around scar or foot)
- Stiffness & swelling
- Deep vein thrombosis (blood clot in vein), Pulmonary embolism (clot in lungs)
- wound problems
- Ongoing pain (including complex regional pain syndrome)
- Failure of the repair, rupture and revision surgery

The above complications are rare but can occur.

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