ACHILLES REPAIR

SURGERY INFORMATION



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THE SURGERY

- The surgery involves one long incision over the site of the achilles tendon
- The achilles tendon ends are identified and sutured together
- The tube of soft tissue surrounding the repair (paratenon) is closed over the repair
- The wound is then closed and a boot with 3-4 wedges is placed





THE HOSPITAL STAY

- You wake up with bulky bandages and a post op boot with 3-4 wedges
- Your foot will be elevated overnight, and you have antibiotics through a drip
- Depending on your medical conditions, you will either need aspirin or clexane injections to thin your blood for 6 weeks
- You will be able to touch your foot to the ground only

WHEN YOU GO HOME

- You will need medications for pain relief
- You will need either aspirin or clexane for 6 weeks to prevent blood clots
- Please leave all dressings intact until your appointment with Dr Graff
- You will get an appointment for your post op appointment in 2-3 weeks where the dressings will be taken down
- After this you will be able to shower normally on a shower chair and pat the dressings dry, only if you keep your foot pointed down. You will still need the boot for sleeping

REHABILITATION

All patients are different. These timelines are only a guide, and some patients may progress faster or slower than others.

- You will need a boot with 3-4 wedges for 4 weeks
- You will have appointments with Dr Graff at 2 weeks and 6 weeks

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0-2 wks	 You will be in a boot with 3-4 wedges You will only be allowed to touch your foot to the ground for balance. You will need to bag the leg for showers Pain relief: Please take regular Panadol with meals and before bed Please take aspirin 150mg daily or clexane for 6 weeks
2-4 wks	 Post op appointment with Dr Graff You will then go back into the boot with 3 wedges another 1-2 weeks You can start weightbearing in the boot You can take the boot off for showers to sit on a shower chair and keep the foot pointed down You can start isometric calf strengthening You can start hip and knee ROM, strengthening and leg lifts with the boot on
4-6 wks	 You can remove 1 wedge per week of the boot You can increase to active dorsiflexion to neutral with physiotherapy You can start active theraband inversion and eversion exercises below neutral with physio Continue hip and knee exercises with the boot on will have an appointment with Dr Graff and an xray
6-8 wks	 Post op appointment with Dr Graff You can weightbear as tolerated in the boot without wedges Active plantarflexion and dorsiflexion to neutral (pain free) and continue resisted inversion/eversion with foot in neutral Commence propropception training
9-12 wks	 You can wear normal shoes if you are able to fit into them (may still have swelling) You can range the ankle past neutral with physio You can start cycling/swimming
3-6 mnth	 Post op appointment with Dr Graff You can progress strengthening and range of motion with pain free double leg heel raises and single leg balance with physio From 4 months, light jogging can commence if there is no pain
6-12 mnth	When the leg feels back to normal and the same as the other leg, you can start sport specific training and heavy labour work

WHEN CAN I RETURN TO WORK/SCHOOL?

- Seated work 4-6 weeks
- Prolonged standing 10-12 weeks
- Heavy labour work 9-12 months

WHEN CAN I RETURN TO SPORT?

- Start sport specific training at 6-8 months
- Return to sport when leg same as the other side (9-12 months)

WHEN CAN I DRIVE?

- Left foot 6-8 weeks
- Right foot 10-12 weeks

WHAT CAN GO WRONG?

- Anaesthetic problems
- Nerve injury
- Blood clots
- Infection
- Stiffness
- Re-rupture
- Ongoing pain
- Further surgery

CONTACT

If you want more information, or have any questions or problems, please contact Dr Graff on admin@christygraff.com or please call the rooms on 0493 461 133