

**Dr. Paul DeFrino MD**  
**Achilles Tendon Rupture: A Patient Guide**

## **What Just Happened?**

You have ruptured (completely torn) the largest and strongest tendon in the body. It connects the calf muscles to the heel and is essential for normal use of the foot. Ruptures usually occur in those aged 30-70 years, during a sudden forceful push off from the foot. Without proper healing of the tendon, you will have a permanent limp and weakness when using the leg.

## **How Is It Treated?**

Debate remains regarding the best form of treatment for the ruptured Achilles tendon. The 2 options are: Immobilization or operation. Recent scientific studies showed that, compared to immobilization, an operation reduces the risk of re-rupture and allows a quicker return to work or daily living. An operation is not without risk and these must be balanced against the benefit of the lower re-rupture rate. Both treatments have immobilization for 8 weeks.

## **The Operation**

This is a day case/outpatient procedure performed under general anesthesia. An incision is made near the tendon and the ends are carefully sutured together. Dr. DeFrino uses the latest suture technology, coupled with a scientifically proven stitching technique, which creates a very strong fixation allowing accelerated rehabilitation by early weight bearing and home physical therapy starting at 3 weeks.

## **What Are The Complications Of An Operation**

The actual risk of a complication is individual to you and will depend on a number of factors. Dr. DeFrino will discuss these with you. Risks are very low for fit and healthy, non-smokers, but increase with age, smoking, diabetes and other diseases. Complications include: Infection, wound healing difficulties, nerve injury, deep vein thrombosis and adhesions.