FOOT & ANKLE

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Foot and Ankle Orthopedic Surgery

HAGLUNDS PROCEDURE

Information: A Haglund's lesion may be treated without surgery. If you decide to have surgery then I will remove the Achilles from the heel, remove the bone spur, then reattach your Achilles. The Achilles tendon is the largest tendon in your body. Sometimes I will transfer the tendon from your big toe to your heel bone if this is needed during surgery. Risks of surgery include, but are not limited to: infection, wound healing issues, scar, swelling, stiffness, pain, numbness, injury to vessels, bone healing problems, hardware problems, need for hardware removal, recurrence, other deformity, need for future surgery, perhaps a condition you may feel is worse or not much better from your preoperative status. If you need an excuse for work, please let us know before surgery. If it is your right Achilles, most patients cannot drive until around 8 wks.

On the day of surgery: You and your anesthesiologist will determine what is best for your surgery. Often, a block is provided by the anesthesiologist. This will decrease the amount of pain after surgery. The risks of anesthesia/block will be discussed with the anesthesiologist. You will be brought to the operating room and your leg will be cleaned for surgery. Drapes will then be placed over your leg and your entire body to keep our field clean. You will be given antibiotics before/during surgery. I will perform your surgery (perform an incision, perform the surgery as above and as we discussed in the clinic, add suture/anchors, close the tissue/skin, and then place a boot on your leg that must remain on until your first postoperative visit with me). After surgery, I will discuss the surgery with your guest that day.

After Surgery: You will be taken to the recovery room and sent home when the nurses and anesthesiologist think you are suitable for discharge. You are not allowed to walk on the operative leg. You will be sent home on pain medicine with the hope that you can discontinue it as quick as possible. You can use crutches, knee walker, walker, wheelchair, etc.

Postoperative Course:

2 wks – I will see you for suture removal. You will be given an incisional care handout. Physical therapy will begin and lasts 8-16 wks. You are allowed touchdown weightbearing in the boot with crutches and advance to full weightbearing over the next 4wks (25% of your weight each week). You will peel away a layer from the heel lift each week.

8wks – I will see you again and you will begin to wean the boot and wear comfortable shoes

3 months – You may advance activities slowly

6 months – You will begin to feel that this is "behind you" and although you are not fully normal/healed, you should be doing quite well. You will still feel weak and this is normal. You will begin to run slowly and advance for another 6 months. It takes 9-12 months to return to sport. Swelling is the last issue to resolve and can be 12-18 months for any foot surgery. I'm happy to see you at any time during the scheduled visits or unscheduled visits if you have questions/concerns. *Thank you and I will take excellent care of you!*

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