FOOT & ANKLE CENTER · PATIENT GUIDE

Mid-Substance Achilles Pain

Non-surgical care, the in-office tenotomy with PRP, and your recovery.

In-office procedure | Walk in a boot right away | Shoes at 2 wks | Exercise at 6 wks

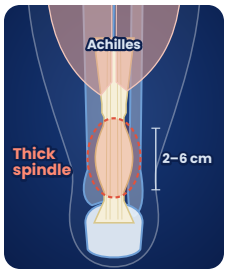


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1 Mid-substance Achilles pain

In **mid-substance Achilles tendinopathy**, the middle of the tendon, **2 to 6 cm above the heel**, wears down from repeated overload. It is **degeneration more than inflammation**: the fibers become disorganized and the tendon **thickens into a tender, spindle-shaped swelling**. It is often worse with activity and stiff in the morning. **Why it hurts:** as it thickens, its **center loses blood supply**, and that generates pain.

Antibiotic warning: this condition is linked to **fluoroquinolone** antibiotics like **Cipro**. **Never take one** if you have it.



Back of the heel

2 Non-surgical care

- ✓ **Heel lift** to take tension off the Achilles.
- ✓ **Topical anti-inflammatory** applied twice daily.
- ✓ **Calf (gastrocnemius) stretching** at home.

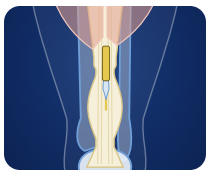
Also: physical therapy; for a flare, a short time in a cast or walking boot; an oral steroid taper can be effective.

If it is still painful at **2–3 months**, an **MRI** checks the tendon.

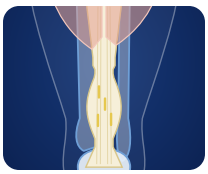
How common is it? About **2 in 1,000 adults** see a doctor for it each year, usually in their **30s to 50s**, men and women equally. Runners are at higher risk, but only **about 1 in 3 cases** is linked to sports.[1]

3 The in-office procedure: tenotomy with PRP

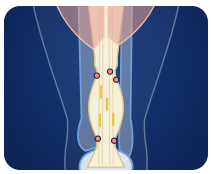
In the office, Dr. Moore makes a **tiny poke hole in the center of the tendon**, then turns the blade to make **several parallel cuts along the fibers**, plus a few punctures above and below. This creates **channels for blood flow** so your body can clean up the damage. **PRP** (platelet-rich plasma, from a **small sample of your own blood**) carries growth factors (VEGF, FGF) that help **new blood vessels grow**. **Cost:** insurance covers the tenotomy, not the PRP (priced at the time).



1. Central stab blade along fibers



2. Parallel cuts blade turned



3. Punctures above & below

4 Your recovery, step by step

Follow-up visits: 2 wks · 6 wks · 3 mo

Day 0	Day 0	2 wk	6 wk	3 mo
Procedure day	**Right away**	**Week 2**	**Week 6**	**Month 3**
Have a driver if you take Xanax	Walk in a tall CAM boot with heel lift	Regular shoes; visit	Follow-up; exercise	Follow-up visit

Weight-bearing

You can put weight on it right away in a tall CAM boot with the heel lift in place. Regular shoes at 2 weeks.

Everyday life

Incisions: poke holes closed with Dermabond glue; dressing off and shower the next day.
Driving: if you take Xanax, have someone drive you; then you can drive right away.

5 · Good to know

Does it work? Studies of percutaneous tenotomy report **about 3 in 4 patients have good or excellent results**.[2] Results vary from person to person.

Other option? An **open procedure** uses a longer incision to clean out (debride) the damaged central tendon. It needs **no weight on the leg for 4–6 weeks** and leaves a bigger incision.

6 · When to call us

Fever, redness or drainage at an incision, worsening pain, a too-tight splint or dressing, or new calf pain or swelling: come to our walk-in clinic, Glenn Mitchell Dr, **Mon–Fri, 9 am–5 pm**. After hours, call **757-321-3300**. **Call 911 for chest pain or trouble breathing.**

Potential complications. Any procedure has risks. With this one they include bruising, infection, sensitive or thickened scars, blood clots in the leg (DVT), pain that does not improve, and other risks.

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Questions about your Achilles treatment?
We're here to help. Learn more at
www.atlanticortho.com

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To make an appointment: **757-321-3360**
Please ask for Dr. Moore.
Surgical scheduling after your appointment: **757-321-3307**
1975 Glenn Mitchell Dr, Suite 200, Virginia Beach, VA 23456
atlanticortho.com

[1] de Jonge S, et al. Br J Sports Med 2011;45:1026. [2] Testa V, et al. Med Sci Sports Exerc 2002;34:573; Maffulli N, et al. Am J Sports Med 1997;25:835.
This handout is general education, not medical advice or a guarantee of results; recovery varies from person to person. Illustrations are simplified drawings.