

MY ATR RECOVERY EXPERIENCE WITH COMMUNITY TIPS

THE INJURY: Feel like you were kicked in the calf; when walking, foot enters a hole in the ground, pain, numbness...
If you are thinking about going Non-Op, you should be in a cast within days of the injury – get to the ER right away! See a Podiatrist. If you have a large tear, wait too long, have medical conditions, Non Op may not work.

JUST RUPTURED YOUR ACHILLES: <http://achillesblog.com/just-ruptured-your-achilles/>

CHRONOLOGY: <http://achillesblog.com/chronology-of-achilles-rupture-to-recovery/>

FAQ: <http://achillesblog.com/frequently-asked-questions/> **PT:** <http://achillesblog.com/rehabilitation/physical-therapy/>

NON-OP CANDIDATES

NO OP UPDATES...Check out: <http://health.usnews.com/health-news/news/articles/2012/12/28/surgery-may-not-be-needed-for-ruptured-achilles-tendon>

Also Check out Norm's Blog: <http://achillesblog.com/normofthenorth/2010/03/08/a-more-complete-review-of-the-options-surgical-vs-non-operative/>. **NOTE:** Norm, [Kellygirl](#), and others have gone Non Op. Check out their blogs.

THE OPERATION

- * Surgery should last 30-90 minutes, depending on YOUR circumstances. Mine took 60, but I waited too long to have surgery and had blood clots and a large tear.
- * Incision size will depend on gap\tear size (mine was 9mm). Stitches and\or staples (*1 had 22 staples*) will be put in.



- * You should leave with a nerve block that should last for a day or so, pain pills and feel drowsy, but OK.
- * I think I was out for about an hour and a half. The total cost for my surgery was \$18K \ UIC Hosp. (*and counting*)

VACOCast VS CAM OR OTHER BOOTS (*CAM BOOTS...Air Cam, Bledsoe, Ossur, ProCare, Ovation, Max Trax, etc.*)

CAM BOOTS –When I was swollen and\or sore, the Cam boot was too tight around the ankle and lower Achilles\heel area, and hurt. However, when I put on the VACOCaest, the hot\sore spots were gone, immediately. You should receive a basic Cam boot from the hospital, and can purchase you own online for between \$50 - \$300.

The VACOCast is great if you are in pain or walking - It is the best. The Cam boots are lighter and not as big, but are also not nearly as comfortable as a VACOCast. The VACOCast is more like a system that is made for the protocols. It can be adjusted from 30 PF (ankle down) to 15 DF (ankle up). It also has an adjustable ROM option and different, washable linings, and is also waterproof - so you can shower, swim and more during rehab.

However, deciding to upgrade the boot provided by the hospital is a personal decision, and ANY boot will work.



(AirCast)



(VACOCast)



(Bledsoe)

FIRST THREE DAYS OR SO.... (It's like counting the seconds).

- After nerve block wears off, you will have pain – how much, and for how long, varies. I have read nightmare stories, but mine lasted for about 15 minutes on my heel (6 out of 10), and that was it in regard to serious pain of any kind. DO NOT BANG YOU FOOT INTO ANYTHING. Be careful. Move slowly and keep your toes clean. Elevation and rest are great, but I had a difficult time with both (discomfort\pain)

The first few days are no fun – NWB (No Weight Bearing). My nerve block took almost two days to wear off (luckily), but even when I felt no pain or discomfort, my leg was totally numb and getting around the house on crutches and trying to keep your leg elevated was a more of a pain than the actual pain. It takes a lot of getting use to. You will be almost confined to one spot for the first 3-7 days, so build a fort with EVERYTHING you need. LOL. Getting sleep the first 3-7 days MAY also be an issue, so grab some when you can. Honestly, get ready to go to jail...mental jail for a week or so...sorry. ☹ However, you will feel better EVERYDAY.

FIRST WEEK OR SO.... (It's like counting the minutes).

TIPS THAT MAY HELP

* Buy cushions for crutches, a knee walker (if you want), heat and ice pads, extra pillows and setup your house BEFORE surgery for post surgery living. How will you brush your teeth, clean up, eat, use the bathroom, etc.? A bed urinal cup may also help. Pull out all the old movies, some books, magazines, etc.

* When you go to the hospital, ask for transportation – do not crutch it around – your muscles will get sore and may lock up on you later. Your back will also get sore from elevation, etc., so the heat pads are great, as well as massages. Also prepare to exhaust your good leg and arms with the crutches, so use the heat pads before bed, look for multiple places to sit and/or elevate, because parts of your body will hurt, and you need to keep your blood circulating and sore\hot spots to a minimum. You can also purchase chair for showers, a plastic cast\boot cover and an ankle cold\heat wrap.

* Crutches are a pain in the behind, so be careful. DO NOT put you crutch on a wet floor, it will give and you WILL fall. With crutches, if you are going down, squat, and if you are going up, stand tall, and put your good foot first, and use the hand rail. GO SLOW. If you can afford an (Ebay) knee walker, buy or RENT ONE from a medical supply store.

Good luck with the FIRST FEW DAYS and the FIRST WEEK!!! It gets WAY better going forward.

SECOND WEEK OR SO.... (It's like counting the hours)

* At the end of week one, I made an appt. with my doc and ordered them to take my splint off – it hurt. Things got better right away. ☺ I took a VACOCast in with me (although I had the Cam Boot), and they let me put it on. I could not set my foot to 30 degrees (ever), so I set it to 20. Toes stay down. Either way, you will have to make some adjustments to any boot (*tightness, sore spots, etc.*), so make sure you know how. The boot setting goal is 30 to 0 degrees over 3-8 weeks, depending on your protocol\Doctor. Move the degree in 5 degree increments, weekly.

*By the end of week two, with the boot on 23/7, the hot spots from the splint were fading, and my swelling was 80%+ gone. Besides the soreness from the incision and bandages, I was OK most of the time. Feeling a lot better after the end of week two and waiting for stitches to come out. The foot is feeling sore, but there is on going pain, just occasional pain here and there. Getting better with crutches and moving around the house, but arms, hips, both upper legs, good lower leg, back and every other part of my body is being taxed\maxed out.

NOTE : *However, you may be put in a cast, so this would change. Or, you may have started with a cast and will be re-casted or bootied. Either way, whenever you can get to a boot, do so.*

DAY 19: Doc follow-up appointment. (AFTER YOU ARE PUT IN A BOOT) [On 9/24/2013] 2.5 weeks

* This was supposed to happen at 3 weeks, but I could not get an appointment for the 27th, so my Doc took me a few days early. I had 20 plus staples removed, and all but 3 were a breeze. The last one – near the heel, was very painful. They put white, horizontal strips going across the back. I was also told to start PWB and to start doing toe and ankle exercises. For example, moving toes up and down, writing out the alphabet and hinging the ankles up and down to stretch the Achilles. I am going to wait on this until the pain from the staple removal dissipates a bit.

I was also told that I could take the boot off at night and he moved me from 20 degrees Plantar Flexion [PF] (my foot could not go to 30), to 10 degrees – adding that he wanted me at 0 when he sees me again in 3 weeks (Oct. 18th). Lastly, he warned that this is a stage where people can re-rupture easily with the boot off and the added freedom.

With the above said, depending on your approach, Doc and whether or not you have a cast, you may be in-step with me or, may have to wait for another week or so before you are able to start PWB (Partial Weight Bearing).

WEEK THREE OR SO (It's like counting the Days)

For now, I am just working on PWB and exercises and regaining mobility a bit. I started PWB while sitting down and putting weight on my foot, and graduated to 2 crutches with weight and then one crutch. The pains are starting to go away all together, but there is soreness on the heel and bottom of the foot. The discomfort from the staples are also subsiding and things are looking up. My foot is beginning to feel a lot better. Week 3 is a minor turning point in terms of pain and overall recovery. I also started to do some PT on a part time bases because the (removed) staples at the bottom of my foot near my heel still hurt a bit when I hinged my ankles. By now, you are also used to the crutches and boot and things should be a lot easier.

WEEK FOUR (One Month) 10-4-2013 (Now we are counting the weeks and next Doc appt.....:-)

Today marks one month! **Man, what a difference.** After my doc appointment, I walked a bit PWB and FWB, and felt no pain whatsoever. I moved my PF from 10 to 5 today and will get more aggressive with my PT exercises. If you do not do them, you will have a problem getting your foot to 0 degrees. I am still a bit cautious and do not take my boot off at night, but I may start doing it in a week or so. The other good news is that I am now sleeping well at night, which helps the healing process, exponentially – since I am not a much of a elevation-type of guy. However, I have almost no swelling at this point, but my ankles are a bit sore at times from walking. I had a bad ankle strain after my initial injury that still bothers me at times. My exercises entail moving my toes, writing out the alphabet with my toes, hinging my ankle up and down and round-and-round -slowly. That's it. Nothing else. I do them for 10 minutes, 3 times per day.

WEEKS 4-6 +++ (My next Doc appointment is at week 6.5 on 10-18-2013) Counting Doc and PT Appointments!!!

At this point, I will start to follow MY protocol (The Exeter Protocol with slight modifications), and will be at 0 PF at week 6. My sutures come out then and that's when I will start FWB and sleeping with my boot off. In preparation of week 8, I ordered a foam roller, compression socks, heel lifts and a stationary bike (\$300 bike for only \$109 from Amazon – "Body Rider Fan Bike"). The goal is to be boot and crutch free between weeks 8-10. My protocols are more aggressive because of the clots. The quicker I am moving, the better.

BE PATIENT! LINKS TO RE-RUTURE BLOGS: <http://achillesblog.com/re-rupture/>

Good luck!

Ron

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