Haglund’s Lesion Resection and Achilles Tendon Reattachment
Post-Operative Rehabilitation Protocol

Phase 1- Weeks 1-4:

Physiotherapy goals:

• Maintain independent ambulation
• Pain and oedema control
• Protection of operated foot in a short-leg non-weight-bearing cast in a plantarflexed position

Interventions:

• Patient discharged from hospital in a below-knee plaster of Paris backslab
• Mobilisation with crutches, non-weight-bearing for 4 weeks
• Encouraged to maintain limb elevation for “55 minutes in the hour”
• Attend clinic no later than 2 weeks for removal of sutures and change of cast

Phase 2- Weeks 4-12:

Physiotherapy goals:

• Protection of healing tissues in a pneumatic walker with heel wedges
• Progressive weight-bearing with removal of one heel wedge per week- aim to be plantigrade at 8 weeks
• Achilles tendon active plantarflexion exercises without resistance
• Pain and oedema control

Precautions:

• No strength training/activation against resistance of Achilles tendon until week 10
• No ankle dorsiflexion beyond neutral until 12 weeks
• Avoid prolonged walking and standing

Interventions:

• Progressive weight-bearing in the pneumatic walker
• Pain and oedema control with ultrasound/cryotherapy/deep tissue massage
• Activate other muscle groups without stretching the Achilles tendon
Phase 3- 12-16 weeks:

Physiotherapy goals:

- Normal walking in standard footwear without walking aids
- Restore 4-5/5 power in all muscle groups including the Achilles tendon by 6 months

Interventions:

- Gait training
- Begin resisted active ROM exercises from 12 weeks using closed and open chain exercises- Theraband plantarflexion exercises from 12 weeks, progressing to a Stairmaster at 14 weeks and finally a leg-press from 16 weeks
- Commence double and then single heel raises from 14 weeks
- Gastroc/soleus stretching from 14 weeks

Phase 4- 4-6 months +:

Physiotherapy goals:

- Patient to increase level of activity independently
- Able to undertake a single heel raise stance
- Return to sport if appropriate

Interventions:

- Increase strengthening of all muscle groups against resistance
- Commence jogging, running, stair climbing
- Proprioceptive drills