Summary: FHL tendonitis and posterior impingement syndrome are the most common reasons of posterior ankle pain. They are not only specific to the dancers. The prevalence of FHL stenosing tenosynovitis may be higher than reported and should always be considered in the differential diagnosis of posteromedial ankle pain, also in nonathletes. Posterior ankle arthroscopy with the patient in prone position is a safe and effective surgical procedure in the treatment of hindfoot pathologies except posttraumatic arthrosis.

Background: Posterior ankle problems offer a diagnostic and therapeutic challenge. Endoscopic surgery is a relatively new tool in overcoming this challenge.

Aims: To provide short-term clinical results of posterior ankle arthroscopy in the treatment of hindfoot pathologies.

Methods: Clinical outcomes of 2-portal posterior ankle arthroscopy with the patient in prone position, in a series of patients with posterior ankle pain were evaluated retrospectively.

Results: 60 patients (mean age, 37) with 61 posterior ankle arthroscopies were evaluated at a mean follow-up time of 27 months (range, 6 to 75). Procedures, which all carried out by the same surgeon, were: Flexor hallucis longus tendon was affected in all cases in different degrees and tenolysis of the tendon was performed in all cases (61); isolated tenolysis of FHL (11); osteochondral lesion debridement and drilling via anterior portals (6), and posterior portals (7); excision of os trigonum (11); synovectomy anteriorly and posteriorly in rheumatoid (2), and nonrheumatoid patient (1) and in PVNS (2); debridement of synovial osteochondromatosis (2); debridement of subtalar joint arthrosis (4); debridement of tibiotalar arthrosis anteriorly and posteriorly (4); tenolysis of peroneal tendons (4); debridement, drilling and transtrocar bone grafting of large intraosseous talar ganglions (6); fixation of talar fracture (1). 14 anterior arthroscopies were performed simultaneously with the patient in supine position. One patient revealed sural neuropathy, which cured after release of the nerve. The mean AOFAS score improved from 56.7 to 85.9 (p

Conclusion: FHL tendonitis and posterior impingement syndrome are the most common reasons of posterior ankle pain. They are not only specific to the dancers. The prevalence of FHL stenosing tenosynovitis may be higher than reported and should always be considered in the differential diagnosis of posteromedial ankle pain, also in nonathletes. Posterior ankle arthroscopy with the patient in prone position is a safe and effective surgical procedure in the treatment of hindfoot pathologies except posttraumatic arthrosis.