The Zadik Osteotomy for Insertional Achilles Tendinosis

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The Condition

- Insertional Achilles tendinosis
- Retro-calcaneal bursitis
- Achilles tendon bursitis
- Haglund’s deformity
- Pump-bump
Presentation/Diagnosis

• Swelling at TA insertion
  • usually large and diffuse
• Pain
• Tenderness
• Difficulty in walking
• Shoe wear issues
• X-rays
• MRI (37 patients)
• 25% inflammatory conditions or diabetes
Indication for surgery

- Failure of conservative treatment
- POP/Aircast boots
- Physiotherapy
- Orthotics and night splints
- NSAIDS
- (hydrocortisone injections!!!)
- extracorporeal shockwave therapy
Present day surgical procedures

• Open retrocalcaneal decompression and tendon debridement
• Decompression of the retrocalcaneal space - endoscopic and open
• FHL tendon transfer in patients with insertional Achilles tendinopathy
• Partial calcaneal ostectomy
Bursitis of the Posterior Part of the Heel
Stanley W KECK, Patrick J KELLY
Mayo Clinic, Rochester, Minnesota

JBJS, 47-A, MARCH 1965

The Procedure
- a 5-10mm superiorly based wedge of bone removed
- fixed with 2 hole 3rd tubular plate
- POP 6/52
46 yr woman. Insertional TA tendinosis. Failed previous surgery. Excellent result following Zadik osteotomy.
Our series

- 43 patients - 65 feet
- 31 women, 12 men
- Median age - 42 years (21 - 59)
- Symptomatic for at least 6 months
- AOFAS, FFI and SF36
Our Results

• No failures so far
• 1 patient needed metalwork removal
• No clinically relevant TA weakness
• All had symptomatic relief
Summary

- Insertional Achilles tendinosis is a challenge
- Traditional techniques in my hands have been less than successful
- The Zadik procedure has been a ‘revelation’, at least in the short term!!!

Thank You