The Modified Maffulli’s Technique for the Treatment of Achilles Tendon Pathologies

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Disclosure

• My disclosure is in the Final AOFAS Mobile App

• I have no potential conflicts with this presentation
Introduction

• Strongest but the most injured
• Affects high performance and recreational athletes
• Pain is moderate and up to 30% of the lesions are not diagnosed


- Chronic lesions are treated with augmentation (Plantaris or Fascia Lata) or tendon transfers (FHL or PB)
- Allografts are also described
- Distance between stumps is not the only issue
- Be aware of skin problems!!

Objective

Show clinical and functional results of patients submitted to a modified percutaneous technique with ST (Maffulli’s) for chronic Achilles tendon lesions and pathologies.

- Affecteds high performance and recreational athletes
- Pain is moderate and up to 30%

Material and Methods

- Ten Patients (11 tendons) from Jan 11 to Jan 13
- Chronic ruptures (more than 3 weeks), reruptures and massive tendinopathies
- AOFAS and VAS pre and post op
- 20 consecutive single-leg heel raises
Physical Exam

Loss of posterior ankle silhouette. Can be a problem!!
Surgical Technique

- Isolating the Graft
- Stripping the graft
- Distal Transverse Approach
- Proximal Transverse Approach
- Graft passage
- Suture proximal stump
- Complete passage
- Guide Wire
- Interference screw fixation
Three Months Post Op
Results

- Ten patients – 11 tendons
- 18 months of follow up on average (10~28m)
- All patients were able to perform 20 single-leg heel raises at the same cadence
- Only one skin breakdown after a fall but the graft was ok
Discussion

- Achilles tendon ruptures are common and up to 30% may be missed.
- Acute lesions can be treated conservatively but neglected lesions show better results after surgery.
- FHL and PB are weaker (40% unable to perform 20 single-leg heel raises).
- V-Y lengths the system loosing power.

Discussion

• Distance between stumps is important but the loss of posterior leg silhouette has to be considered.

• Minimally invasive procedures are becoming more popular among surgeons to avoid skin breakdown.

• Technique presented avoids skin problems and uses the original triceps muscle.

• Showed good results.

Conclusion

• Safe technique
• Good results and low morbidity
• All patients were able to perform 20 single-leg heel raises
• Better quality papers should be made
References