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# Beating Achilles Tendonitis

*Everything you need to know about this common ankle injury*

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# Beating Achilles Tendonitis

*Everything you need to know about this common ankle injury*



Christopher Edwards, MD, William Saar, DO, Carl Hasselman, MD, and Alex Kline, MD with UPMC Orthopaedic Care.  
(Not pictured: Stephen Conti, MD, MaCalus Hogan, MD, and Alan Yan, MD)

*Achilles tendonitis can happen to anyone at any age. It's a nagging injury that can get worse if untreated or ignored. It's also one of the most common injuries treated by the orthopaedic foot and ankle surgeons at UPMC Orthopaedic Care.*

The Achilles tendon is the largest and strongest tendon in the body. It anchors the calf muscles to the heel bone, which subjects it to very high forces involved in walking, running, and jumping. It can become inflamed and painful from overuse, and even tear from too much stress and pressure.

"We see Achilles tendonitis in all sorts of patients," says Alex Kline, MD a foot and ankle orthopaedic surgeon at Three Rivers Orthopedic Associates-UPMC. "Injuries may seem to happen suddenly, but they usually result from tiny tears that occur over time.

"The longer it goes on, the harder it is to treat."

## **TYPES OF ACHILLES TENDONITIS**

When the Achilles tendon becomes inflamed, swollen, and irritated, it is called tendonitis. According to Dr. Kline, there are two distinct types:

- Non-insertional Achilles tendonitis, which is caused by small tears within the tendon. This type of tendonitis is common in athletes and active adults in their 30s to 60s, including runners and those who play tennis and basketball.
- Insertional Achilles tendonitis is damage that occurs in the spot where the tendon meets the heel bone. It's often associated with a bone growth, or spur, known as Haglund's deformity, which irritates the tendon. Although it occurs most often in older patients, this type of tendonitis can happen at any age, even in people who are not active.

If the inflamed Achilles continues to be stressed, it can tear or rupture. "Having tendonitis can increase your risk of a rupture," says Dr. Kline. "When that happens, it can feel like a pop or kick in the back of the leg."

### TREATING ACHILLES TENDONITIS

Treatment works best—and can prevent additional injury—when Achilles tendonitis is diagnosed and treated early, says Dr. Kline.

"The Achilles has an amazing ability to heal. We can get good results even without surgery," he says.

According to Dr. Kline, minor Achilles tendon discomfort can be treated with rest, over-the-counter anti-inflammatory medicine, stretching, and ice. Using a heel lift or walking boot also can help take the pressure off the tendon.

"If you have trouble walking because of your heel pain, you should see a foot and ankle surgeon," he says. New specialized treatment includes platelet rich plasma (PRP) injection therapy, which uses a patient's own concentrated platelets to promote healing. Physical therapy also can be helpful.

Surgery may include removing the bone spur that is hitting the Achilles tendon, repairing the tear, removing the damaged portion, and transferring a tendon to the heel bone to restore motion.

### PREVENTING ACHILLES INJURIES

"The biggest mistake people make is ignoring the pain," says Dr. Kline. "Pain is a sign that something is wrong. If your Achilles pain persists, see a doctor."

To reduce the risk of Achilles tendonitis or a rupture, he recommends the following:

- **Stretch your calf muscles.** Stretching is key to injury prevention. Do it in the morning and before/after exercise to maintain flexibility.
- **Start slow.** Make sure you take time to warm up. And ease into a new exercise program or activity: start slowly and gradually increase the intensity of your workouts. "Going from nothing to full bore can cause big problems," says Dr. Kline.
- **Wear the right shoes.** Wear supportive shoes with adequate cushioning. Replace your worn-out shoes. Avoid shoes with a stiff back or tight strap.
- **Listen to your body.** Don't do activities that cause pain. And if you feel pain, stop.

## Improving Quality of Life



Lynn Balachko may not be an athlete, but she relies on her feet to get around. The Etna resident walks everywhere: to the bus stop, her doctor's office, the grocery store, and the community pool with her grandchildren. When her left heel started to hurt, she just kept walking—until she felt a sudden, sharp pain.

"It was excruciating," says Lynn, 58. "I could hardly walk."

Still, she waited another week before seeing her primary care physician, who referred her to Dr. Kline at Three Rivers Orthopedic Associates-UPMC. He diagnosed her with insertional Achilles tendonitis and a partial tear caused by a Haglund's deformity under the tendon. He operated on Lynn in February 2016, removing the growth and repairing her Achilles with a tendon transferred from her toe.

"We shaved the bump down so it no longer irritates the tendon," says Dr. Kline. "The tendon transfer increases the strength of the Achilles."

The surgery was a success. But eight months later, Lynn was near the end of a three-week European vacation when she felt a sudden pain—this time in her other ankle.

"I did it again," she says. "I'd been doing so much walking. I was sightseeing in the Netherlands walking around windmills when I felt a pop. I just had to grin and bear it."

After returning home, Lynn went to see Dr. Kline, who initially treated her Achilles tendonitis with rest, ice, and anti-inflammatory medicine. He also had her wear a walking boot to relieve some of the pressure. But the underlying cause was another Haglund's deformity.

"We knew surgery was likely going to be necessary," he says. In November 2017, Dr. Kline performed the same procedure on Lynn's right Achilles. Today, she is fully recovered and pain-free.

"Before, I could barely walk; every step was painful. It was really affecting my quality of life," she says. "Now, nothing can stop me. I'm walking faster, even up hills, and I don't have pain. I feel great."

# UPMC Foot and Ankle Surgeons at UPMC Orthopaedic Care

From initial diagnosis through treatment and rehabilitation, the foot and ankle surgeons at UPMC Orthopaedic Care will work to provide the best possible care for various conditions. At UPMC, these surgeons use state-of-the-art technology to diagnose and treat all types of foot, ankle, and heel injuries.

## COMMON CONDITIONS

Whether you have a new injury or suffer from pain, swelling, or other symptoms, UPMC's orthopaedic foot and ankle surgeons offer complete treatment options to help you find relief. Some of the common conditions treated by UPMC's orthopaedic foot and ankle surgeons include:

- **ACHILLES TENDONITIS**  
Inflammation of the tendon that connects your calf muscles to your heel bone.
- **ARTHRITIS**  
Both osteoarthritis and rheumatoid arthritis.
- **BUNIONS**  
Extra bone and fluid that grow at the base of the big toe.
- **DIABETIC FOOT DISEASE**  
Nerve damage and numbness that results from diabetes.
- **FLAT FEET**  
Painful condition that affects the arch of the foot.
- **FRACTURES**  
Breaking an ankle or foot.
- **HAMMER TOES**  
Deformity of the toes.
- **TENDON TEARS**  
Tears in the body's tendons, commonly in the feet and ankles.
- **ULCERS ON THE LOWER LEGS OR FEET**  
Open sores or lesions that will not heal.

# UPMC Orthopaedic Care Foot and Ankle Surgeons



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## GET HELP FOR YOUR FEET

Whether you have a new injury, or symptoms that include chronic foot, ankle, or heel pain, swelling, or limited movement, seeking care from a foot and ankle surgeon can help keep you moving. The foot and ankle surgeons at UPMC Orthopaedic Care have access to UPMC's network of support services and can offer comprehensive, individualized treatment options to help you or a loved one find relief.

For questions about common foot and ankle conditions, including Achilles tendonitis, or to make an appointment with a foot and ankle surgeon, call 1-866-987-ORTHO or visit [UPMC.com/Ortho](http://UPMC.com/Ortho). ■