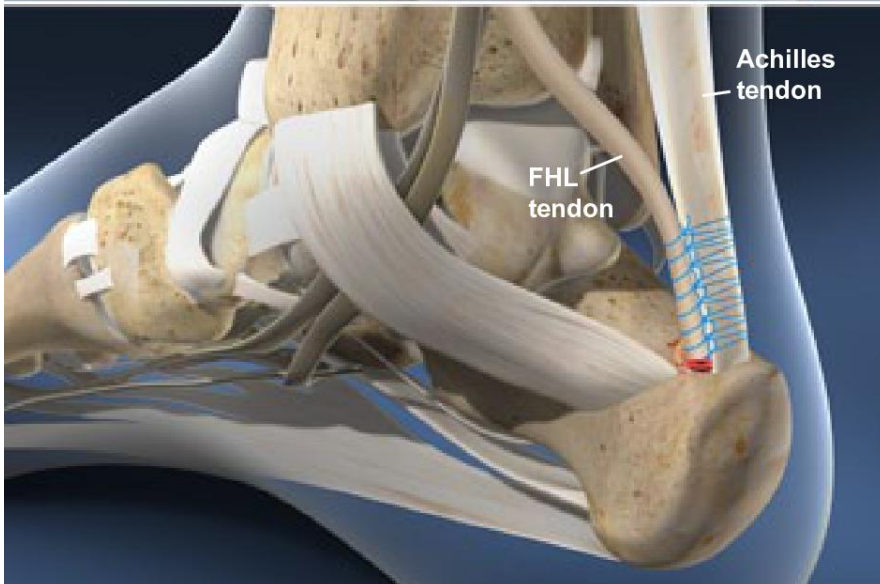
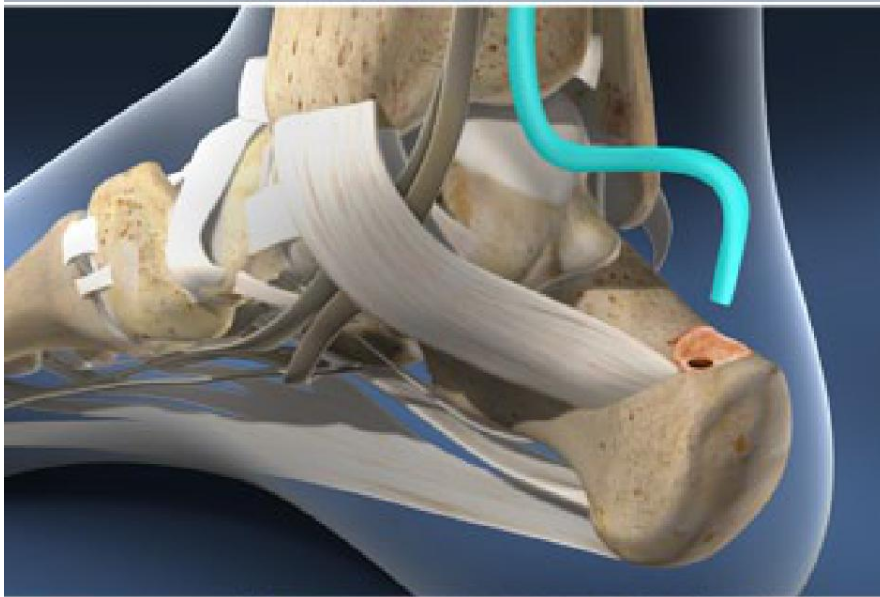
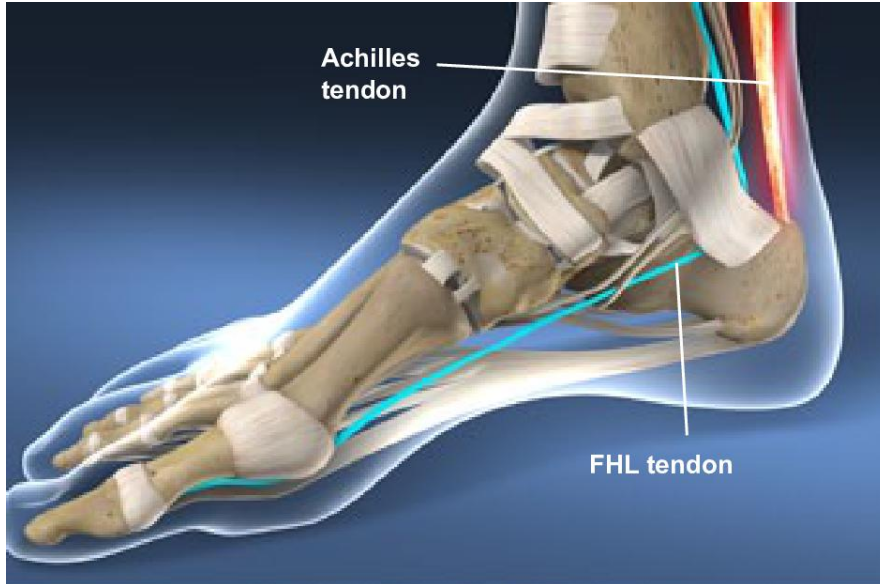




Tendon Transfer (FHL to Achilles)



Overview

This procedure repositions the flexor hallucis longus tendon, (commonly called the "FHL" tendon) to reinforce a diseased Achilles tendon. The FHL tendon travels along the inner side of the ankle and foot. It is responsible for flexing the big toe. Repositioning it adds strength to the Achilles.

Preparation

In preparation for the procedure, you are anesthetized. An incision is created in your skin. This exposes your Achilles tendon and your calcaneus (which is commonly called your "heel bone"). If a bony bump has formed on your calcaneus, it is removed. The surgeon also removes any diseased tissue from your Achilles.

Detaching the Tendon

Through the same incision, or through one or two additional incisions, the surgeon exposes your FHL tendon. The surgeon cuts it to disconnect it from your big toe.

Shifting the Tendon

Next, the surgeon drills a small tunnel into the top of the calcaneus near the place where the Achilles tendon is attached. The FHL tendon is shifted over to this tunnel. The end of the tendon is trimmed and reinforced. The surgeon inserts an anchor that pushes the tendon into the tunnel and locks it within the calcaneus. The tendon may be sutured into position alongside the Achilles. This repositioning provides stability for your ankle.

End of Procedure and Aftercare

When the procedure is complete, the incisions are closed. The foot is placed in a cast or a boot. You will be monitored for a brief time after surgery before you are allowed to go home. You will need physical therapy as your ankle heals. Because your FHL tendon was detached from your big toe, it is normal to notice some toe weakness. This will not seriously impact the function of your foot.