

Management of Achilles Tendon Ruptures

Bradford Acute-MSK Achilles Rupture Service (**BAARS**)

Damian Buck, Dr Alastair Jones, Dr Colin Ayre

Introduction

- The Achilles tendon is the most frequently ruptured tendon in the body and there is ongoing debate regarding the optimal treatment ^(1; 4).
- Recent research has shown that non-operative management results in similar re-rupture rates and functional outcomes when compared to surgery but without the added complications of operative treatment ^(2; 5).
- Functional rehabilitation programmes with early weight-bearing and ankle movement have been shown to assist in the healing and remodelling of the tendon ⁽³⁾.

Aims

- A service evaluation of the Bradford Acute-MSK Achilles Rupture Service (BAARS), analysing outcomes from non-operative and surgical management approaches was undertaken.

Methods

- 128 Achilles tendon ruptures were seen between 2021 and 2024.
- Outcomes were assessed prospectively using re-rupture rates and the Achilles Tendon Rupture Score (ATRS) at 12-month follow-up.
- A retrospective comparison of clinic appointment numbers and associated costs before and after implementation of BAARS was also performed.

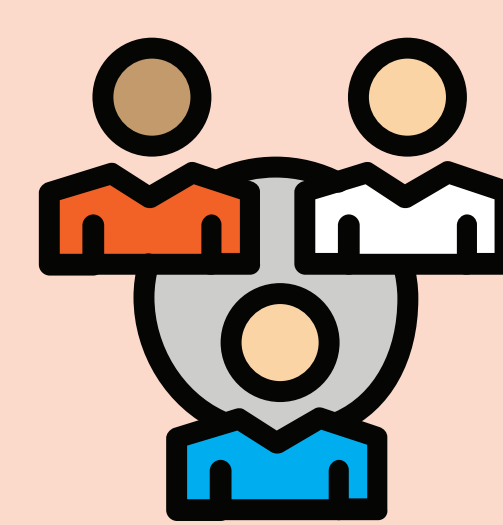
PLEASE SCAN



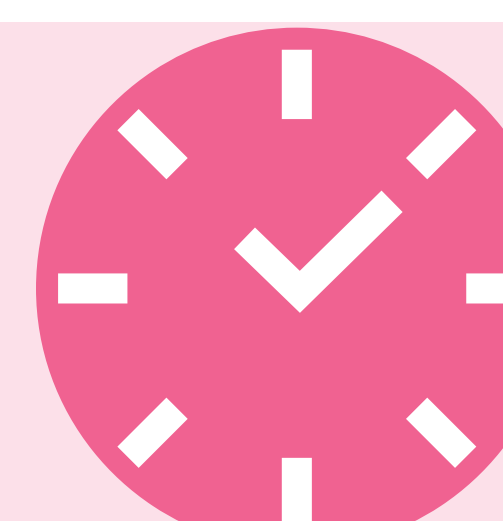
QR code link to BTHFT rehab protocol



KEY FEATURES of the Bradford Acute-MSK Achilles Rupture Service (BAARS)



Collaborative MDT working sports medicine physicians, physiotherapy, orthopaedics



Same day in-clinic USS

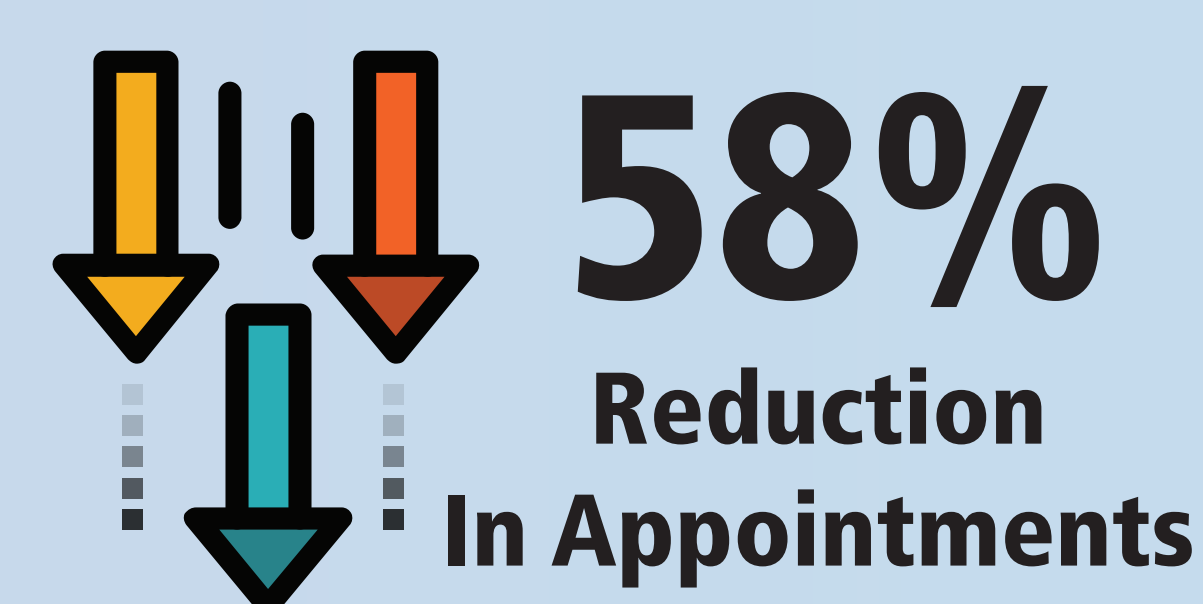
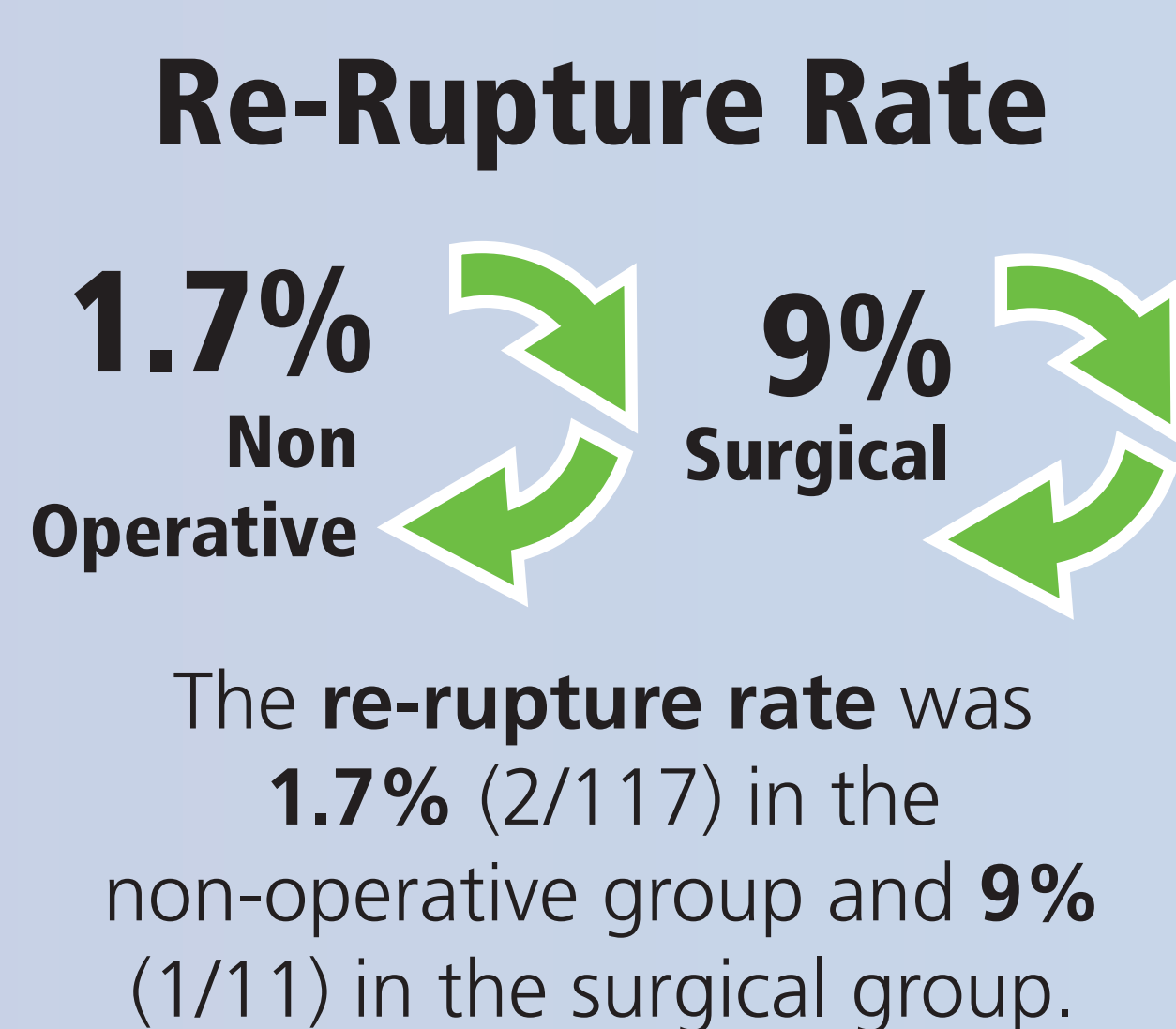
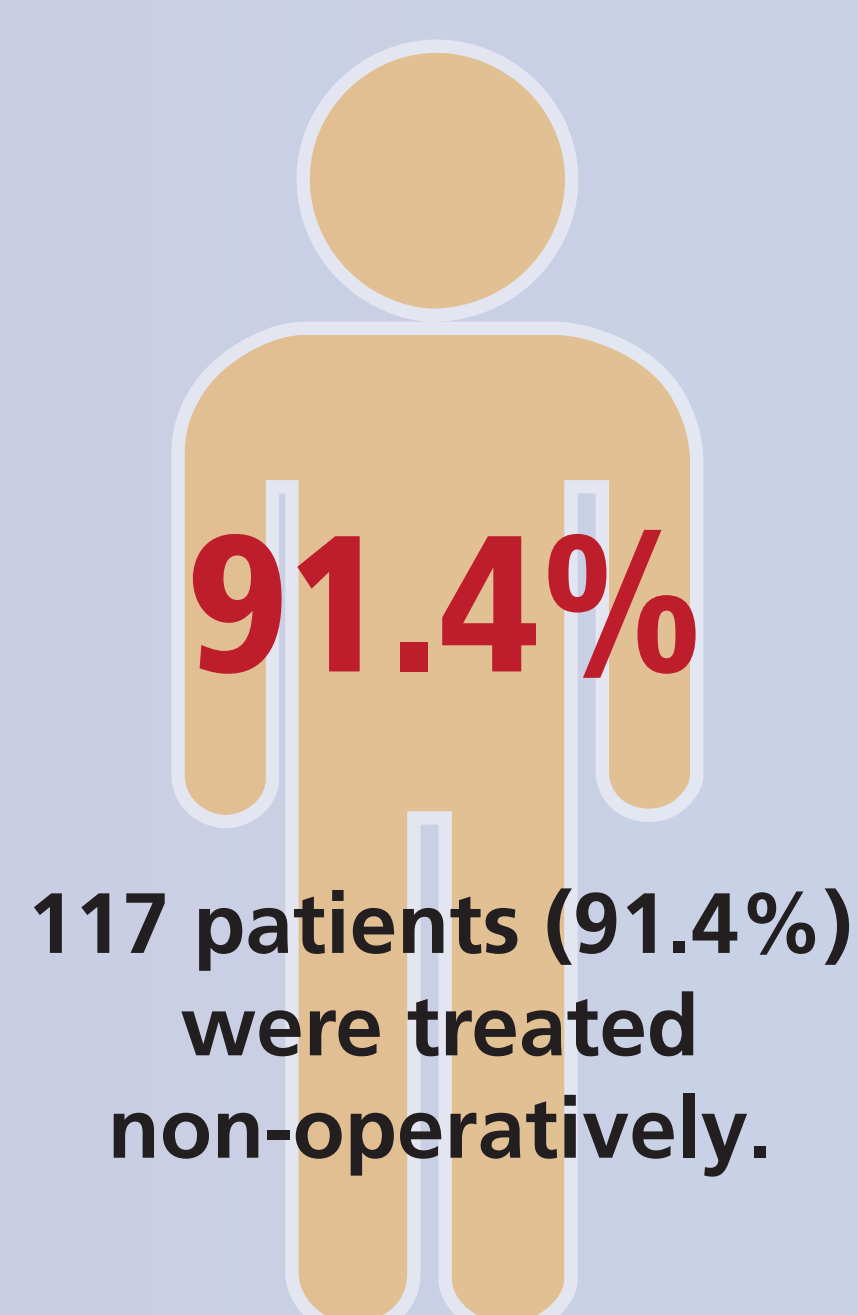


Dedicated rehabilitation programme



Early weight-bearing

Results



Comparison with service data from a 12-month period prior to BAARS showed a **58% reduction** in outpatient appointments (260/110).



Overall annual estimated cost saving of **£67K**.

Conclusion

- **BAARS provides a safe, effective, cost-efficient pathway for Achilles tendon ruptures.**
- **The service significantly reduced orthopaedic outpatient clinic demand and generated substantial cost savings, offering an effective model for musculoskeletal service delivery.**

References

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