Getting Evidence into Clinical Practice: Musculoskeletal Research Facilitation Group (CAT Group) Date:19.11.2016

Specific Question:

In patients with non-operatively (conservatively) managed tendo-achilles (TA) ruptures, is accelerated rehabilitation superior to routine rehabilitation for reducing pain and return to function time, without increasing adverse events of tendon lengthening and re-rupture rates?

Clinical bottom line

In patients with non-operatively (conservatively) managed TA ruptures, there is no evidence that compares an accelerated rehabilitation programme against routine rehabilitation.

Within the papers reviewed for the CAT process the exercise parameters which define routine rehabilitation are poorly reported.

There is insufficient evidence to change current clinical practice and further research is needed to compare the effects of an accelerated rehabilitation programme against routine rehabilitation for reducing pain and return to function time, without increasing adverse events of tendon lengthening and re-rupture rates in patients with non-operatively (conservatively) managed TA ruptures.

Why is this important?

Patients with conservatively managed TA ruptures are often referred to physiotherapy following a period of immobilisation and progression from equinas to plantar grade. It is unknown whether accelerated rehabilitation (progressive strengthening introduced at an earlier stage of the rehabilitation process) after immobilisation is superior to routine care, if there are any additional complications such as tendon lengthening or re-rupture rates following accelerated rehabilitation.

Search timeframe (e.g. 2006-2016)

Inclusion Criteria

| | Description | Search terms |
|--------------------------|--|--|
| Population and Setting | Patients with first time tendo-achilles ruptures managed conservatively | Patients with conservatively/ non operatively managed tendon-Achilles ruptures |
| Intervention or Exposure | Non operative/conservative management accelerated rehabilitation/physiotherapy/strengthening exercises | Accelerated Rehabilitation Early strengthening/ loaded exercises |

CAT Lead: Fraser Philp Date CAT completed: 19.11.2016 Email: f.d.philp@keele.ac.uk Date CAT to be reviewed: 19.11.2018

Getting Evidence into Clinical Practice: Musculoskeletal Research Facilitation Group (CAT Group) Date:19.11.2016

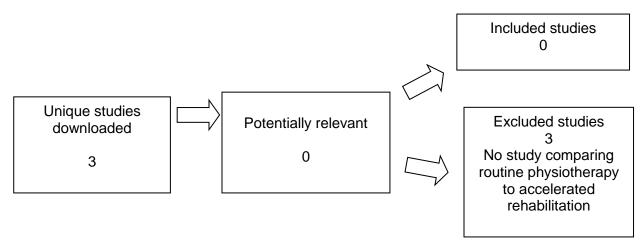
| Comparison, if any | Non operative/conservative management with rehabilitation /physiotherapy/strengthening exercises | Routine exercise Routine physiotherapy |
|----------------------|--|---|
| Outcomes of interest | Pain Return to function/sports Re-Rupture rate Tendon lengthening | Pain Return to function/sports Re-rupture rate Tendon lengthening |
| Types of studies | Randomised controlled trials and systematic reviews | |

Routine Databases Searched

Clinical Knowledge Summaries, PEDro, BMJ Updates, Clinical Evidence, TRIP, Database, NICE, HTA, Bandolier, The Cochrane Library, Medline, Cinahl, Embase, PsycInfo, Professional websites. Joanna Briggs Institute, Web of Science, Sports Discus and Pub Med

Date of search- 2016

Results of the search



The three studies were excluded as they did not answer the CAT question. Of the studies reviewed none compared routine care against an accelerated program.

CAT Lead: Fraser Philp Date CAT completed: 19.11.2016 Email: f.d.philp@keele.ac.uk Date CAT to be reviewed: 19.11.2018

Getting Evidence into Clinical Practice: Musculoskeletal Research Facilitation Group (CAT Group) Date:19.11.2016

Summary

There is insufficient evidence to change current clinical practice and further research is needed to compare the effects of an accelerated rehabilitation programme against routine rehabilitation for reducing pain and return to function time, without increasing adverse events of tendon lengthening and re-rupture rates in patients with non-operatively (conservatively) managed TA ruptures.

Implications for Practice/research

Further research is needed to compare the effects of an accelerated rehabilitation programme against routine rehabilitation for reducing pain and return to function time, without increasing adverse events of tendon lengthening and re-rupture rates in patients with non-operatively (conservatively) managed TA ruptures.

The exercise parameters which define routine rehabilitation are poorly reported on. A better understanding of the exercise components in routine rehabilitation of conservatively managed TA ruptures may result in better treatment outcomes or explanation into the occurrence of adverse events such as re-rupture rates or tendon lengthening.

What would you tweet? (140 characters)

In patients with conservatively managed TA ruptures, there is no evidence comparing accelerated rehabilitation programme against routine rehabilitation

CAT Lead: Fraser Philp Date CAT completed: 19.11.2016 Email: f.d.philp@keele.ac.uk Date CAT to be reviewed: 19.11.2018