



Introduction

Typically, the rupture is repaired surgically. However, nonsurgical

movement. If the patient fails to follow the prescribed immobilization protocol or if the immobilization method used is insufficient, it can contribute to the separation of the tendon ends.

- **Poor blood supply:** The Achilles tendon has a relatively poor blood supply, particularly in its middle portion. Inadequate blood flow to the sutured area can compromise the healing process, leading to poor tissue repair and potential separation of the tendon ends.
- **Infection:** Infection at the surgical site can impair healing and weaken the repair, increasing the risk of separation of the tendon ends.
- **Delayed rehabilitation:** Proper rehabilitation plays a crucial role in restoring tendon function and preventing complications. If the patient does not adhere to the recommended rehabilitation program or if there are delays in initiating rehabilitation, it can negatively impact tendon healing and increase the likelihood of tendon end separation.
- **Patient factors:** Certain patient-related factors, such as underlying medical conditions, smoking, poor nutrition, or compromised immune system, can impair the healing process and contribute to the separation of tendon ends.

Conclusion

It's important to note that the separation of tendon ends after suture of the Achilles tendon is a potential complication that can occur despite appropriate surgical technique and care. Proper diagnosis, timely intervention, and close monitoring by a healthcare professional are crucial to address this complication and ensure optimal healing of the Achilles tendon. Understanding the aetiology and pathogenesis

of subcutaneous Achilles tendon rupture is crucial for effectively managing this injury. The rupture is often caused by a combination of factors, including overuse, degeneration, mechanical stress, age-related changes, and anatomical variations. Following surgical