

## **Medial Gastrocnemius Recession**

Irvin Oh<sup>1</sup>, Jiyoun Kim<sup>2</sup>, Jenny Oh

<sup>1</sup>Orthopaedics and Rehabilitation, <sup>2</sup>Orthopaedics

Introduction of medial gastrocnemius recession surgical technique for treating isolated gastrocnemius contracture and associated pathologies, such as Achilles tendinopathy, plantar fasciitis and forefoot disorders. This procedure is preferred over the Strayer in young and active patients as it minimizes postsurgical compromise in power and endurance. Surgical release of medial gastrocnemius epimysium is performed 4-6cm distal from the medial border of the popliteal fossa. Medial gastrocnemius recession is a safe alternative to Strayer procedure in patients with mild and symptomatic isolated gastrocnemius contracture.