Lateral Ankle Sprain

Lateral ankle sprains are the second most common injury seen in sports.

The mechanism of injury involves the foot rolling in and pointing down which most commonly occurs when landing from a jump, changing directions or landing on uneven surfaces.



The injury causes the ligaments on the outside of the ankle to stretch, resulting in damage to the fibres, which is graded 1 to 3.

- Grade 1 defined as mild damage without instability of the affected joint.
- Grade 2 sprain is a partial tear to the ligament.
- Grade 3 sprain is a complete tear or rupture of the ligament.

The anterior talofibular ligament is the most affected, followed by the calcaneofibular ligament and lastly, the posterior talofibular ligament.

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Commonly associated with traumatic ankle sprains are avulsion fractures where the ligaments pull hard on their bony attachments pulling a small fragment of bone off.

Symptoms

- Audible snap, click or a feel of tearing at the time of injury.
- Varying degrees of swelling, redness and possibly bruising around the outside of the ankle.
- Pain will usually be present on touching the tissue on the outside of the ankle and with rolling the foot in.
- Pain with walking and weight bearing

Management

Initial management of an ankle sprain involves allowing damaged tissue to settle and reducing inflammation through rest, ice compression and elevation (RICE) for the first 24-72 hours, depending on the severity of the injury. Anti-inflammatory medication is useful in settling inflammation and making the ankle more comfortable.

Often the ankle will be strapped by your physiotherapist to support the damaged ligaments and allow the body to begin to repair them, and crutches may be used if the patient is unable to weight bear. X-rays will be taken if possible fracture is suspected.

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The second phase of management involves soft tissue release, joint mobilisation and stretching to the ankle to restore full range of movement. This is done in conjunction with a graded strength

When the ankle is damaged, sensory information from the ankle to the brain is diminished, resulting in instability of the ankle and increased risk of secondary injury. This often results in ankle injuries becoming recurrent or chronic. Your physiotherapist will structure a program of progressive balance and strength exercises for the ankle to improve control, protect the ankle and prevent injury recurrence.

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If you've suffered an ankle injury book in with one of our experienced Physiotherapists today to get you back on your feet as soon as possible!

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