



Lateral Ankle Sprain

(Also known as Ankle Sprain, Rolled Ankle, Lateral Ligament Sprain of the Ankle, Twisted Ankle)

What is a sprained ankle???

A sprained ankle is a condition characterized by damage and tearing to the soft tissue and ligaments of the ankle. The most commonly affected ligament in this condition is the lateral ligament.

A ligament is a strong band of connective tissue which attaches bone to bone. The lateral ligament of the ankle comprises of three bands of connective tissue and is responsible for joining the fibula to the talus and calcaneus

The lateral ligament acts to prevent the foot and ankle from turning excessive inward movement. When this movement is beyond what the ligament can withstand, tearing to the ligament occurs.

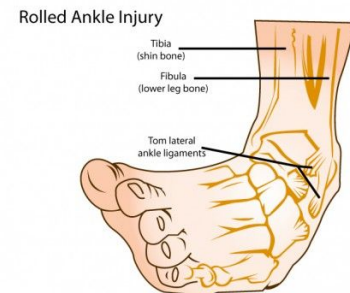
This condition is known as a sprained ankle and may range from a small partial tear resulting in minimal pain, to a complete rupture resulting in significant pain and disability.

Ankle sprains range in severity from grade 1 to grade 3 and are classified as pictured above. The majority of ankle sprains are grade 2.

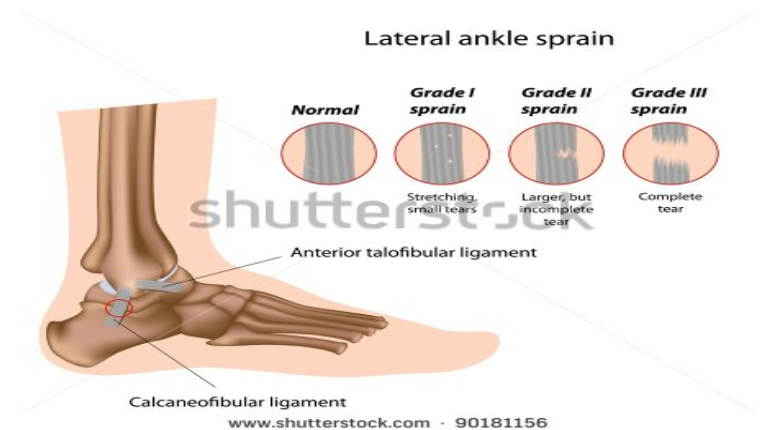
Causes of a sprained ankle

An ankle sprain commonly occurs during activities involving jumping and landing, or, activities requiring rapid changes in direction, especially on uneven surfaces.

The usual mechanism of injury is an extreme combination of turning the foot inwards (inversion) and pointing the foot and ankle downwards (plantarflexion) during weight



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bearing. In patients who experience recurrent ankle sprains there is often a loss of joint stability resulting in the patient rolling their ankle on flat surfaces or during trivial activities.

Signs and symptoms of a sprained ankle

Patients with this condition may notice a sudden pain or pain after activity +/- the following symptoms

- Pain on lateral (outside) ankle
- Swelling which occurs within a few hours on outer ankle
- Difficulty or pain with weightbearing / limping
- Pain on certain ankle movements: especially bending foot in (inversion), pointing toes down (plantarflexion)

Prognosis of a sprained ankle

In cases of a minor to moderate sprained ankle (grades I and II), return to sport or normal activity can usually occur in 2 – 6 weeks with appropriate management and treatment. Patients with a more severe injury (e.g. a complete rupture – grade III) will require a longer period of rehabilitation to gain optimum function.

Contributing factors to the development of a sprained ankle

Although many ankle sprains are unavoidable, there are some factors which can increase a patient's likelihood of experiencing an ankle sprain or suffering a recurrence. These factors need to be assessed and corrected with direction from a physiotherapist.

Some of these may include:

- poor proprioception or balance
- inadequate rehabilitation following a previous ankle sprain
- joint instability
- muscle weakness
- poor core stability or a lack of co-ordination
- joint stiffness
- poor muscle flexibility
- inadequate warm up
- inappropriate training
- inappropriate training surfaces
- poor biomechanics or foot posture
- decreased fitness or sport specific conditioning
- fatigue
- inappropriate footwear

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Acute Management of Lateral Ankle Sprain

Initial Management Includes, but is not limited to, the following

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|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| <p>RICE</p> <p>Relative rest (avoiding painful activities)</p> <p>Ice (15-20 mins every 1-2 hours, with layer between ice and skin)</p> <p>Compression (bandage or tubigrip)</p> <p>Elevation (ideally above your heart)</p> |  |
| <p>Pain Free Movement of the ankle in all directions</p> <ul style="list-style-type: none"> - toes down (plantarflexion) - toes up (dorsiflexion) - toes in (inversion) - Toes out (eversion) |  |
| <p>Try to walk as normally as possible, without pain, to avoid further injuries and pain.</p> <p>Crutches may be needed initially in some more severe strains to achieve this if it is too painful to put weight on your ankle normally.</p> | |

If you are finding that you continue to have pain or difficulty completing activities you used to do, you may benefit from a physiotherapy review and a graduated exercise program that is individualised to you. If you would like to know more about how physiotherapy can help you, or to book an appointment give our friendly staff a call on (02) 6363 1031 or drop into the clinic.

**** This Form is GENERIC ONLY and does not replace medical assessment and individualised treatment. It is a guide only and will not be appropriate for all types of ankle/ foot injuries. STOP IMMEDIATELY if this increases your pain, and seek appropriate medical advice ******

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