

Ankle Sprains

Reports estimate that 25,000 Americans suffer from an ankle sprain each day. Ankle sprains account for almost half of all sports injuries. Accurate diagnosis and treatment of ankle sprains is imperative - some studies indicate that 30% of people with ankle sprains will still have problems with their ankle a year later and 30% will suffer a recurrence of the sprain.

What is an ankle sprain?

An ankle sprain is an injury to one or more of the ligaments in the ankle. Ligaments connect bones and when the ankle joint is twisted it may stretch, partially tear or completely tear the ligaments. The most common sprain is a sprain of the ligaments on the outer part of the ankle. Occasionally the ligament of the inner ankle can be sprained or even the ligaments in the upper shin (a “high” ankle sprain).

Common Causes

More than 80% of ankle sprains are a result of inversion, or inward rolling, of the ankle. This is commonly experienced in athletic activities that involve running, pivoting or jumping. Risk factors for ankle sprains include previous ankle sprain, impaired balance, type of sport played, position and muscular or range of motion deficits. Excess body weight may also be a risk factor for males.

Evaluation and Diagnosis

Obtaining a thorough, detailed history of events is critical in the evaluation of ankle pain in order to lead to an accurate diagnosis. Immediate evaluation is important to determine if there are any other injuries such as a fracture. Common signs and symptoms of an ankle sprain include swelling, pain, instability and bruising. Numbness or severe weakness may suggest a related nerve injury. Examination of the ankle for evidence of instability and localizing pain is part of the initial assessment. Your doctor may order an x-ray or MRI for further evaluation especially if you cannot walk for more than 4 steps. Ankle sprains are generally categorized into three categories.

Grade 1: The most common type, these are associated with a mild degree of swelling and pain related to stretching of the ligament.

Grade 2: More commonly seen in athletic injuries, these are associated with a moderate degree of swelling and pain and are related to an incomplete tear of the ligaments.

Grade 3: The most severe of ankle sprains, these are associated with significant swelling and pain and are related to a complete tear of the ligaments.

Treatment

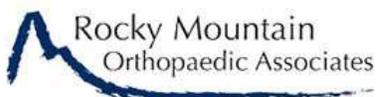
Rest, Ice, Compression and Elevation (RICE) are key components to optimal recovery. If you are limping crutches will allow your ankle to rest and recover more quickly. While using crutches attempt to walk with a normal gait as early as tolerated. Ice should be applied with your ankle elevated above your heart for 20 minutes 3-5 times per day. An elastic wrap or brace can provide needed compression and protection.

Rehabilitation

Early motion is the key to proper rehabilitation. Initially, range of motion exercises are performed with the foot elevated. As symptoms subside, stretching exercises are performed to restore full mobility. Strengthening, balance and agility training exercises are also essential for a full recovery and to reduce the chance of a future ankle sprain. Aerobic fitness can be maintained during recovery by cycling or swimming. Rocky Mountain Orthopedic Physical Therapy's ankle sprain rehabilitation program is designed to safely and quickly return you to full sporting activity. Your program can be established with as few as two sessions or as many as needed to meet your goals. Call 683-2225 to begin your rehabilitation program.

Prevention and Re-injury

The most important prevention strategy is proper rehabilitation. Properly applied ankle supports can also help prevent ankle sprains and do not adversely affect performance. Semi-rigid and rigid supports are most effective and cost less than athletic tape.



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