ANKLE SPRAINS

What is an ankle sprain?

The ankle joint is capable of four fundamental movements: plantar flexion (pointing your toes down), dorsiflexion (bringing your toes up towards your face), inversion (turning your foot in towards the midline of your body) and eversion (turning your foot away from the midline of your body). A sprain is an overstretch of the ligaments that hold the bones of the ankle together. The ligaments on the outside of the ankle are most commonly injured when the foot inverts. Inversion ankle sprains are the most common type of sprain (85%) Less frequently patients can sustain a "high ankle sprain" when the ankle everts High ankle sprains are much more serious, take longer to recover, can have fractures associated with the ankle sprain, and take longer to recover and return to sport.

What are the symptoms of an ankle sprain?

Most commonly you will experience pain on the outside of the ankle just below the end of the fibula (outer skinny lower leg bone). The ankle will be swollen on that side as well. It may turn black and blue over several days if the sprain is severe enough. A sprain may be mild, causing only modest pain, or severe enough to prevent weight bearing.

How do I treat an ankle sprain?

Initial care is the same as for all other acute injuries: RICE (rest, ice, compression and elevation). Use ice for 20-25 minutes out of every hour to minimize pain and swelling. Make sure you use a dampened towel between your skin and the ice pack to prevent frostbite. Compression in the form of an elastic bandage and elevation will help reduce swelling and pain. See an orthopedic physician if you are unable to bear weight or if you fail to notice any improvement over several days. Most ankle sprains do not require surgical intervention, but virtually all of them require physical therapy to restore full motion, strength and function. If you have a significant limp crutches should be used until you can walk comfortably. Your doctor may recommend anti-inflammatories to reduce swelling and pain. We usually will obtain xrays of the ankle to exclude a fracture. Tiny chips, flake fractures, or avulsion fractures are generally treated similarly to an ankle sprain. Generally MRI's are infrequently obtained; they may be used in more chronic or recurrent conditions to assess joint surface injuries.

How do I rehabilitate my ankle?

Rehabilitation, in the form of physical therapy, may begin a few days after the initial injury. The goals of physical therapy are to restore range of motion, strength and function. Range of motion exercises generally consist of moving the ankle through the motions of plantar flexion, dorsiflexion, inversion and eversion. Once motion is close to being full, strengthening may begin. This is commonly done with resistive rubber tubing