

Ankle Sprains

There's a good chance that while playing as a child or stepping on an uneven surface as an adult you sprained your ankle--some 25,000 people do it every day.

Sometimes, a sprain is just an awkward moment when you lose your balance with pain that quickly fades away and you go on your way. But the sprain could be more severe; your ankle might swell and it might hurt too much to stand on it. If it's a severe sprain, you might have felt a "pop" when the injury happened. A sprained ankle means one or more ligaments on the outside of your ankle were stretched or torn. If it is not treated properly, you could have long-term problems.

You're most likely to sprain your ankle when you have your toes on the ground and heel up (plantar flexion). This position puts your ankle's ligaments under tension, making them vulnerable. A sudden force like landing on an uneven surface may turn your ankle inward (inversion). When this happens, one, two or three of your ligaments may be hurt.

Tell your doctor what you were doing when you sprained your ankle. He or she will examine it and may want an X-ray to make sure no bones are broken. Depending on how many ligaments are injured, your sprain is classified as Grade I, II or III.

Treating your sprained ankle

Treating your sprained ankle properly may prevent chronic pain and instability. For a Grade I sprain, follow the R.I.C.E. guidelines:

- Rest your ankle by not walking on it.
- Ice it to keep the swelling down.
- Compressive bandages immobilize and support your injury.
- Elevate your ankle above your heart level for 48 hours.

The swelling usually goes down within a few days.

For a Grade II sprain, follow the R.I.C.E. guidelines and allow more time for healing. A doctor may immobilize or splint your sprained ankle.

A Grade III sprain puts you at risk for permanent ankle instability. Surgery is rarely needed to repair the damage, especially in competitive athletes. For severe ankle sprains, your doctor may also consider treating you with a short leg cast for 2-3 weeks or a cast-brace. People who sprain their ankle repeatedly may also need surgical repair to tighten their ligaments.

Rehabilitating your sprained ankle

Every ligament injury needs rehabilitation. Otherwise, your sprained ankle might not heal completely and you might re-injure it. All ankle sprains, from mild to severe, require three phases of recovery:

1. Phase I includes resting, protecting and reducing swelling of your injured ankle. Early weight bearing with proper protection is actually a benefit for healing.
2. Phase II includes restoring your ankle's flexibility, range of motion and strength.
3. Phase III includes gradually returning to straight-ahead activity and doing maintenance exercises, followed later by more cutting sports such as tennis, basketball or football.

Once you can stand on your ankle again, your doctor will prescribe exercise routines to strengthen your muscles and ligaments, and increase your flexibility, balance and coordination. Later, you may walk, jog and run figure eights with your ankle taped or in an air cast.

It's important to complete the rehabilitation program because it makes it less likely that you'll hurt the same ankle again. If you don't complete rehabilitation, you could suffer chronic pain, instability and arthritis in your ankle. If your ankle still hurts, it could mean that the sprained ligament(s) has not healed right, or that some other injury also happened.

To prevent future sprained ankles, pay attention to your body's warning signs to slow down when you feel pain or fatigue, and stay in shape with good muscle balance, flexibility and strength in your soft tissues.

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