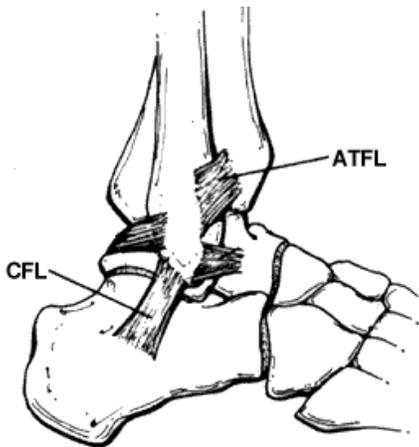


ANKLE SPRAINS

by: DR. TREVOR L. HALL, MD, CCFP, DIP. SPORT MED

Ankle sprains are prevalent in sports that involve a lot of running and sudden turns. Although common, ankle sprains are often undertreated which can sometimes lead to long-term problems such as a “loose” ankle and recurrent sprains.

The typical ankle sprain occurs when you “go over on the outside of your foot” (inversion of the ankle). Pain is felt on the outside (lateral) part of the ankle, and swelling occurs in moderate and severe cases. There is usually tearing of the anterior talofibular ligament (ATFL) and sometimes the calcaneofibular ligament (CFL). The ligaments function to hold the bones of the ankle together.



When should you see a doctor after an ankle sprain? You should probably consult with a sports medicine physician if you are unable to walk without a limp, if you have tenderness of any of the ankle bones, if you have significant swelling, or if you are just unsure about what to do. A physician will be able to tell

whether you need x-rays or whether you have a more severe or complicated injury. Regular ankle sprains have to be differentiated from other injuries such as bone fractures, Achilles tendon ruptures and syndesmosis (“high ankle”) sprains.

Lateral ankle sprains respond well when they are treated “aggressively”. Apply ice as soon as possible (15 minutes, every hour for the first 3 days). Do NOT apply heat, as this will make the swelling worse. Use a tensor bandage to provide moderate compression (loosen at night). Keep the ankle elevated. These measures are important and will assist in decreasing the swelling. The quicker you can get rid of the swelling, the faster you can return your ankle to its full function.

Another treatment option is the use of an ankle brace. A brace can be worn to support the ankle during the healing process. When the injury has healed, the brace may then be worn to protect the ankle from further injury. Your physician may prescribe anti-inflammatory medication, which has been shown in research to help with sprains (if started within the first 48 hours). Physiotherapy may also assist in decreasing any swelling in the joint, and in regaining ankle range of motion as soon as possible.

Once the ankle settles down, the physiotherapist will instruct the athlete on how to regain the strength and balance sense

(“proprioception”) of the ankle, which will be VERY important in preventing recurrent sprains in the future.

Sport-specific rehabilitation exercises are also essential for successful healing and prevention. During the rehabilitation period, there may be some cross-training and conditioning exercises that are prescribed by a physiotherapist or rehabilitation specialist. These exercises can be done to stay in shape so that the rest of your body is ready to play when your ankle is rehabilitated.

Depending on the severity of the ankle sprain, return to sport may vary from a few days to eight weeks or more. This timing also depends on what type of sport or exercise you are returning to. In complicated cases, special tests such as a bone scan or magnetic resonance imaging (MRI) may be necessary to detect other injuries such as small bone and cartilage chips within the ankle joint.

The majority of ankle sprains heal well, especially if they are treated properly, with emphasis on the prevention of future injuries.

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