



ANKLE SPRAINS



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Cause

Ankle sprains are one of the more common injuries we see as podiatrists. Often we will see lateral (inversion) ankle sprains where the foot rolls to the outside, medial ankle sprains can also occur however they are less common. Ankle sprains can vary in severity based on a mild sprain and stretched ligaments, to full ligament tears and avulsion fractures.

Your ankle joint, known as the talocrural joint, is made up of three bones: the tibia (shin bone), fibula (outer lower leg) and talus (ankle bone). Underneath the talocrural joint lies the subtalar joint, which is the articulation between the talus and the calcaneus (heel bone). Your ankle ligaments attach from bone to bone and passively limit the motion available at each joint. On the outside of the ankle lie the lateral ligaments, which are the most frequently injured in an ankle sprain. These include the:

- anterior talofibular ligament (ATFL)
- calcaneofibular ligament (CFL)
- posterior talofibular ligament (PTFL)

The main medial (inside of ankle) ligament is the deltoid ligament which is much stronger than the lateral ligaments.

Symptoms

- Pain on movement or weight bearing
- Tenderness and swelling
- Bruising



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Treatment

Treatment for ankle sprains will be tailored individually depending on the severity of the strain and may include a combination of the following:

- RICE
- Antiinflammatory medication
- CAM walkers to offload the ankle
- Supportive footwear
- Soft tissue therapies including ultrasound and massage
- Strengthening and conditioning

Unfortunately having a sprained ankle can increase your risk of re injury by 40-70%. Because of this it is important to make sure your ankle is correctly rehabbed and strengthened before recommencing training.

A personalised training plan to keep you dancing where possible and allow for conditioning work to continue to get you back to your pre-injured state as soon as possible will also be tailored by our dance podiatrists.