

Ankle Sprain Injury



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What is an Ankle Sprain?

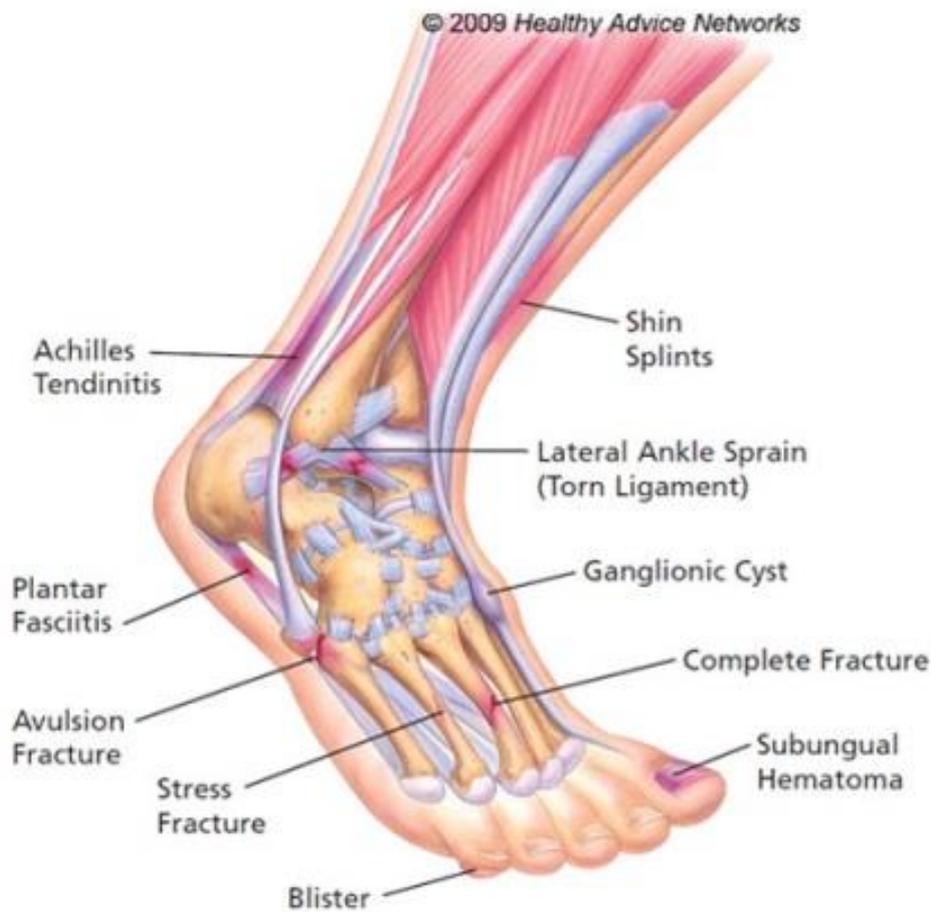
Ankle sprains are common injuries that occur in all age groups and account for 5% of all attendances to emergency departments.

Ankle sprains tend to occur when your toes are grounded with your heel raised. This puts the ligaments around the ankle under tension and vulnerable to injuries. Ankle injuries are often caused by a sudden force that twists the ankle inwards (inversion) or outwards (eversion).

What are Ligaments?

Ligaments are strong fibrous tissues that connect bone to bones, providing stability and keep the joints in the correct position.

Most sprains happen in the lateral ligaments (on the outer part of the foot) and range from tiny tears in the fibres to complete ligament tears.



Why Can it Take So Long to Heal?

Soft tissue and ligaments can take longer to heal. This is because of the structure of the tissue they and time it takes to repair them. The table below outlines the time frame and symptoms to expect during your rehabilitation. It also gives you goals to achieve during your recovery.

Average Time Scale	Common Symptoms	Rehabilitation Goals
0-3 days	Swelling, bruising, unable to fully weight-bear due to pain	Reduce pain, swelling, promote weight-bearing
4-10 days	Swelling reduces, range of moment slowly increases, able to weight-bear more but not able to produce heel to toe movements	Restore function, increase weight-bearing and gentle daily activities
11-21 days	Increase weight bearing with normal heel to toes movement. Pain and fear of daily task movements i.e. climbing stairs, returning to work	Increase strength, stability, daily activities and skills by increasing load bearing capacity ie climbing stairs, returning to work
3-6 weeks	Pain and fear of movement in sport	Return to agility and light sport ie jogging
6-12 weeks		Return to sport at previous level

What Can I do to Manage my Symptoms?

This leaflet is designed to help you self manage and rehabilitate your acute ankle sprain. If after completing this programme your ankle remains symptomatic seek advice from your GP or self refer to Physiotherapy via the link below.

<http://www.plymouthhospitals.nhs.uk/physio-self-referral>

Exercise Programme

Ankle sprains have three phases of recovery and need to be rehabilitated to prevent reoccurrence of injury. Follow each phase as guided below.

Phase 1 (0-3 days)

Protect: the injured area from further damage, a support bandage or simple ankle support maybe useful. Use of crutches is recommended if weight bearing is very painful and problematic. After a few days, gentle motion can be started while you still maintain a level of protection for the injured area.

Optimum Loading: While you are protecting your ankle, gentle motion can, and should, be started after a few days. This progressive loading of your injury can help promote optimal healing of the injury, and it can prevent delays in returning to normal due to joint and muscle tightness or muscle atrophy.

Ice: to reduce swelling and help manage your pain. Do not apply directly to the skin (use a thin piece of cloth between the ice bag and skin). Apply between 15-20 minutes at a time.

Compression: during the early stages this can help to resolve swelling. An elasticated bandage may be helpful. Large amounts of swelling and bruising are common in early stages of ankle sprains are necessary in early healing. Your aim is to try and reduce this over the coming days with this advice.

Elevate: the foot by reclining and propping it up above the waist or heart level when at rest. Swelling often subsides within a few days, but sometimes can take much longer.

Phase 2 (4-21 days)

The aim during this phase is to restore normal ankle range of motion, flexibility, and strength.

Dorsiflexion & Plantar flexion



In sitting or lying slowly pull your toes up towards your head and slowly back down to the floor. Repeat times.....a day.

Inversion and Eversions



Figure A

Figure B

In sitting or lying keeping the knee still, gentle rock the foot from side to side, raising the outer part of the foot off the ground (see figure A), and then rolling the foot so the inner part of the foot rises to (see figure B). Start slowly and gently and slowly progress as far as you can. Repeat..... times.....a day.

Circumduction



In sitting or lying, keeping the knee still, gently move the foot in a circular motion. Repeat times.....a day.

Resisted Plantar Flexion



Sitting on the floor or a chair, put a towel or resistant band around your foot. Point your toes towards the floor, whilst resisting the band/towel, and slowly return to the starting position. Repeat times..... a day.

Resisted Inversion and Eversion



Sitting on a chair, with a resistance band around the chair leg and affected foot. Turn the foot in (inversion) resisting against the band. Repeattimesa day.



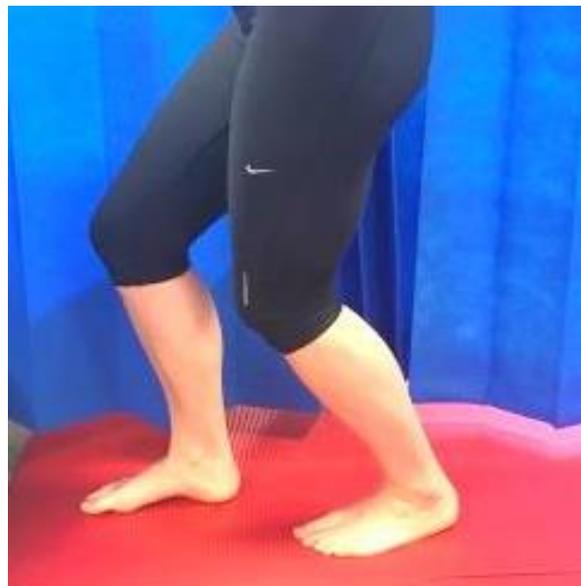
Again sitting with both feet now in the band, turn the affected foot out (eversion) resisting against the band. Repeattimesa day.

Gastrocnemius Stretch



Stand facing a wall. With your unaffected leg forward with a slight bend at the knee. Your effected leg is straight and behind you, with your heel flat on the floor and toes pointing in slightly. Keep both heels flat on the floor and press your hips forward towards the wall. You should feel a stretch down the back of the calf. Hold for a count of 30 seconds..... repeat.....times a day.

Soleus Stretch



Stand facing the wall with your unaffected leg forward with a slight bend at the knee. Your affected leg is behind you with a slightly bent knee, and toes pointing forward. Keep both heels flat to the floor and and press hips forward towards the wall. You should feel a stretch in the calf. Hold for a count of 30 seconds, repeattimes.....a day.

Toe Crunching



Sit with both feet flat on a piece of tissue. Grab the tissue with your toes, curling the tissue towards you. Relax and repeattimes..... a day.

Phase 3 (3-12 weeks)

This phase aims to gradually restore dynamic movement, balance, and increase the load your ankle joint takes during exercise.

Heel Raises



Stand with your weight evenly distributed holding onto the back of a chair. Slowly raise both heels of the floor, raising yourself up onto your tiptoes. Slowly lower and repeat.....times.....a day.

Knee to Wall Stretch



Stand with your affected foot at the base of the wall, not allowing the hips to rotate during the exercise. Slowly bend the knee to wall to feel a stretch, hold for 30 seconds and repeattimes.....a day.

Heel to Toe Walking



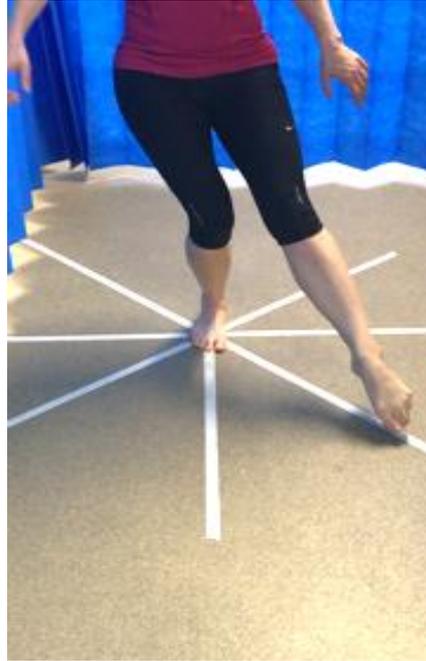
Holding onto a work surface slowly walk ensuring you strike with your heel and roll onto your toes. Repeat.....times.....a day.

Single Leg Balance



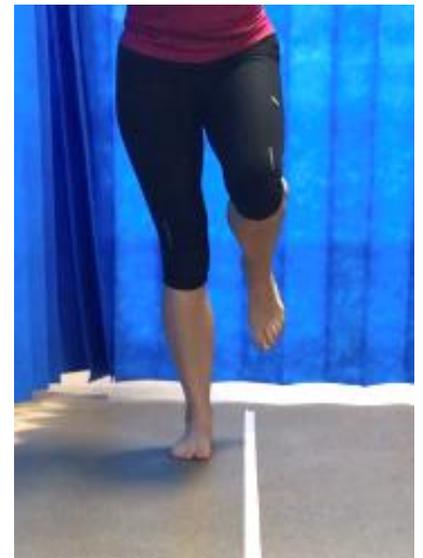
Standing somewhere where you can hold onto if needed. Stand on your affected leg. Try to stand on the leg keeping your balance for 30 seconds. Repeat.....times.
A progression of this exercise would be to stand on a cushion or pillow.

Star



Stand on the affected foot. Slowly extend the lifted leg out into 8 different directions aiming for a point marked onto the floor (as in above image), whilst keeping your balance. Each time you extend the leg try to reach further along the line than you did before. Repeat thistimes.....a day.

Hopping in a Straight Line/Across a Line



Stand on the affected leg, hop along a line whilst maintaining your balance as you land.

A progression of this exercise would be to hop further along the line each time, or hop either side of the line. Repeat this.....times.....a day.



**This leaflet is available in large print and
other formats and languages.
Contact: Administrator
Tel: 01752 432233**