

Ankle Sprain Rehabilitation Guidelines

Ankle sprains (particularly those affecting the lateral ligaments) are one of the most common forms of soft tissue injury experienced in sports involving sprinting and rapid changes of direction. They have a high rate of recurrence, often due to inadequate rehabilitation and an early return to sport. The largest risk factor for an ankle sprain is a **history of previous injury**.

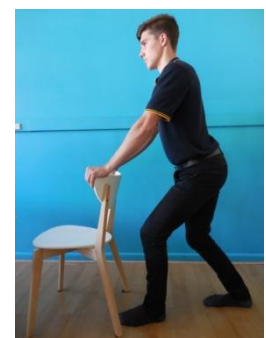
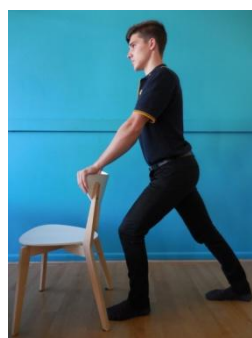
The ankle complex is made up of numerous small bones and joints which are stabilised by a network of ligaments, muscles and connective tissue. Ligaments have two main roles – stability and proprioception (the ability to sense joint position) and thus effective rehabilitation of an ankle sprain should factor in strength, range of motion, coordination and balance components. Taping and bracing may be prescribed by your physiotherapist on a case-by-case basis to allow for a safer return to sport.

The guidelines and exercises described below are some of the more basic and effective strategies utilised to restore normal ligament function following a sprain – your physiotherapist will discuss with you any specific adaptations, progressions and precautions that have been tailored to your individual presentation. Any acute injury should be assessed by your physiotherapist prior to starting a rehabilitation program.

Early Phase Rehabilitation

- 1) RICE – 48-72 hours depending upon injury severity
 - Rest – avoid aggravating activities such as heat, alcohol, running, massage (no HARM)
 - Ice – apply for 20 minutes every 2 hours
 - Compression – utilise a firm compressive garment over the affected limb (such as tubigrip)
 - Elevation – raise affected limb above level of heart (place on a pillow when lying down)

- 2) Static Calf Stretch
 - Stand facing a wall and adopt a split stance position
 - Keep both heels on the ground and lean forward to feel a stretch through the rear calf
 - Perform this stretch with a straight and slightly bent back leg to target both the gastrocnemius and soleus muscles
 - Hold stretch for 30 seconds



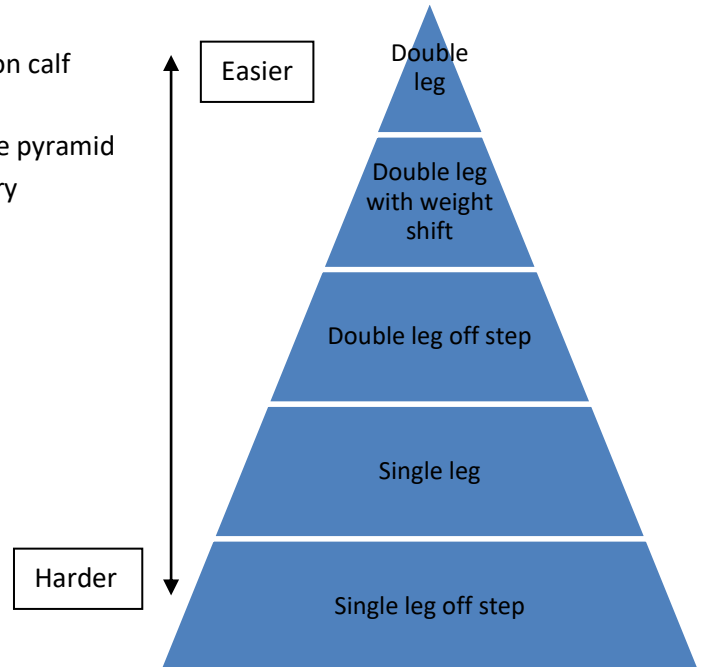
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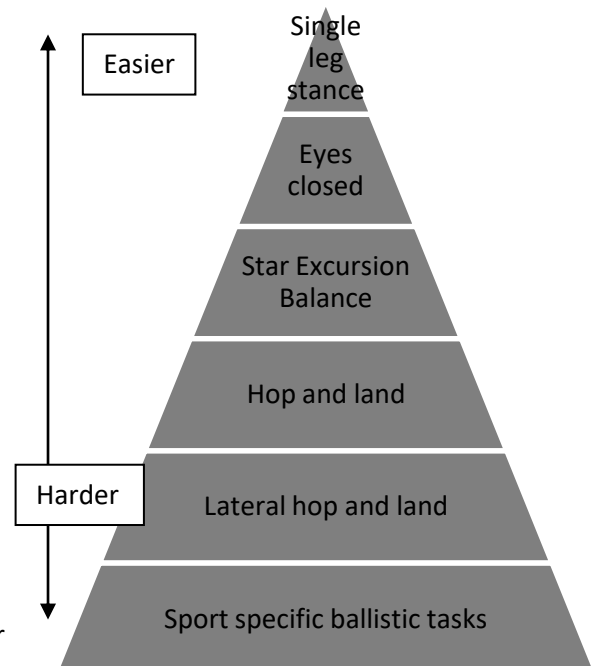
3) Heel Raises

- Feet shoulder width apart
- Slowly raise onto balls of feet, focusing on calf contraction
- Your therapist will guide you through the pyramid progression as appropriate for your injury



4) Balance

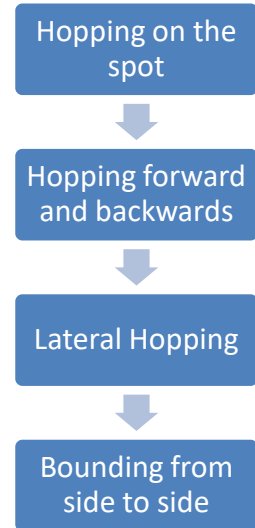
- Focus on maintaining ankle stability when completing balance tasks
- When completing hopping tasks aim to land with soft knees and avoid whole body weight shift
- Your therapist will guide you through the pyramid progression as appropriate for your injury
- Star excursion
 - Placing one foot on the cross in the middle of the star
 - Keeping your balance, aim to touch as far as you can in front of you with your other foot and then return back to the start.



Late Stage Rehabilitation

1) Hopping

- Balance on one leg, up on toes
- Hop on the spot, land and balance
- Concentrate on landing softly and keeping your balance



2) Wobble Board

- Place one foot on the edge of the wobble board
- Carefully place your other foot on the other side of the board
- Do your best to keep the board level for as long as possible
- When this becomes too easy, try balancing on one foot

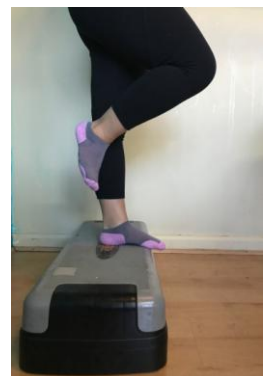


Variations

- Round the world
- 4 points

3) Balance with toes off step

- Place the ball of your foot on the edge of a step/pile of books
- Balance on one foot, not allowing your toe to do anything
- When this becomes too easy try closing your eyes



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