



**the most common  
injury in sports**

By Nima Zarrabi

**over 2,500 per day**

**Lateral Ankle Sprain**

**D**erek Samuel has seen it happen to so many athletes, he's lost count. The scenario usually goes like this: athlete sustains a sprained ankle, parental response is "oh, it's just a rolled ankle," athlete fails to rehabilitate properly and eventually re-injures the ankle weeks down the line, creating chronic ankle instability. As a physical therapist based in San Diego (CA) Samuel has had the opportunity to work with athletes of all levels—professionals, college stars and even adolescents. Often times, he treats patients with ankle injuries. The patients who suffer from chronic ankle pain, have symptoms that tend to frustrate Samuel, who believes these types of injuries can be avoided through simple measures. "There are so many examples of young athletes I've treated who initially thought they had some sort of simple inversion sprain (ankle rolled, causing the tearing of ligaments on the outside portion of the ankle), but it turned out to be more serious, leading to reoccurrence," he says. "They look back in retrospect two years down the road and think 'Oh, if I just went to the doctor I could have avoided this.'

A lateral sprain caused by the inversion of the foot, is the most common injury in youth sports. Referred to by some as a “rolled”, “sprained” or “twisted” ankle, all three terms are considered lateral type sprains. “The term rolled ankle is kind of a wastebasket term we use to describe what is usually called an inversion sprain—it’s when the foot rolls to the outside,” Samuel says. “That is what people also refer to as a twisted ankle. It’s basically a sprain of the most commonly sprained ligament in the entire body called the ATF (anterior talofibular). It’s about two-thirds the size of your pinky.” In sports that require jumping, cutting or even change of direction movement, ankle sprains are prevalent. “The majority of ankle sprains happen when the foot is pointed down towards the ground. For example, any time our feet make contact with the ground, we don’t land on our heels, we land on the balls of our feet, typically referred to as toes, and then that is what rolls over,” Samuel explains. Generally, ankle sprains are categorized as either Grade 1, Grade 2 or Grade 3 sprains. Grade 1 is the most common and rarely requires a visit to the doctor. This is when the foot rolls to the outside and stretches the fibers of the ligament. “With a Grade 1, you will probably be able to continue with your sport, but later on you will get a little sore,” Samuel says. “You will likely wake up in the morning and it probably hurts about a five on a scale of 1-to-10. With this type of sprain, you can usually return to your sport within two-to-three weeks.” A Grade 2 sprain is a partial tear of the ligament and a Grade 3 is a complete rupture of the ligament.

If a lateral ankle sprain is not recognized,

**The instant your child sprains their ankle**



**Immediately protect the ankle from further injury. Stop playing immediately. Continued play may result in making the injury worse, thus lengthening the healing process and keeping them out longer.**

treated and rehabilitated properly, it may end up becoming a recurring injury down the road. Proper care can minimize the length of injury and prevent re-injury.

**What should I do if my child sustains an ankle sprain?**

During the first 48 to 72 hours after a lateral ankle sprain, the first line of treatment will always be the same regardless of the injury. An acronym parents have likely heard Doctors and Physical Therapists use to explain the treatment is R.I.C.E, which stands for rest, ice, compression and elevation. The Sports Medicine and Performance Center at Children’s Hospital of Philadelphia follows the acronym P.R.I.C.E., which is similar with the exception of the letter P, representing the word “Protect”, referring to the discontinuation of play to protect the ankle from further injury. Icing the injury is the next step and should be done immediately to minimize the swelling. Apply ice to the injured region 6-8 times for 20 minutes on and 40 minutes off, throughout the first day. In between ice applications, an elastic wrap or ace bandage should be registered to the injured ankle to keep it compressed. The ankle should also be kept elevated above the level of the heart as much as possible, especially while sleeping. The final component in the early stages is rest. Avoid excessive activity and bearing weight on the ankle.

**Rehabilitation**

If you have any doubt about the severity of your child’s ankle sprain, YFM recommends seeing a physician immediately for a through examination. Samuel suggests visiting with a certified Physical Therapist to implement balance exercises during the rehabilitation process. “The key is getting on one leg,” he explains. “Balance training can help prevent the ankle from rolling over and going too far again.” Examples include, having your child stand on one foot while attempting to reach for something that is not within their grasp. “Kids love catching things so another exercise to try is having them stand on one leg while trying to catch a basketball, football or volleyball.”

With a Grade 1 sprain, chances are your kid is going to be just fine, but one or two therapy appointments to get some direction regarding recovery may go a long way in preventing future injures to the ankle.



**Return to the field**

The return to competition from an ankle sprain should be carefully evaluated by parents. There should be a level of criteria established before contemplating such a decision. “Be sure your child can run without pain or a limp,” Samuel says. “Can they jump up and down on one foot without pain or a limp? Do they have full range of motion in a non weight-bearing position? These are some of the things to consider.” Remember, should you have any doubts at all about your child’s injury, opt for rest. Many kids love to play sports and the thought of missing one game can be unthinkable to them. It is a thought process Samuel often hears from his adolescent patients. “Kids tend to think that their next game is make-or-break, and that is usually because they are not mature enough to realize there is no such thing at their age,” he says. “They build it up in their mind that way, but it’s not reality.”



Parents can help a child keep their injury in perspective by explaining the importance of recovery time and how proper care will benefit them in the future.

Help them realize that missing a few practices or a big game is not the end of the world. It may be difficult for them to grasp initially, but hopefully they will soon realize that countless practices and games await them in the future.

**Protect**

When spraining your ankle immediately discontinue play and examine the severity of the sprain.



**Rest**

Limit weight bearing as much as possible. Its very difficult to reduce swelling in an ankle, so staying off it is a must.



**Ice**

Blood rushes into a traumatized area which causes swelling. Ice will reduce the severity of swelling.



**Compression**

Swelling is the limiting factor for a speedy recovery. Pressure can force the blood out and help with recovery.



**Elevation**

Spend as much time as possible with your foot above your heart to reduce swelling.

