Ankle sprain refers to injury of the ligaments surrounding the ankle joint. Lateral ankle sprains are the most common type, representing 85% of all ankle sprains. A twisting force or "rolling" of the ankle can cause these ligaments to overstretch and tear, either completely or partially. After a sprain, functional ankle instability remains as a residual problem in 10-60% of patients and persistent pain remains in 30% of patients.

PHYSIOTHERAPY CAN HELP!
The physiotherapists at Willow Health Centre provide Evidence-Based care, using a combination of education, manual therapy and exercise prescription to restore pain free joint function.

PREVALENCE
Ankle sprains account for 60% of all foot and ankle injuries reported by Canadians and 22% of sports injuries presenting in emergency rooms.
BEST PRACTICE EVIDENCE

- Active rehabilitation, with immediate weight bearing as tolerated, ankle range of motion and strengthening exercises as tolerated by pain result in a more rapid recovery with respect to function and walking endurance in patients with grade 1 or 2 ankle sprains. \(^1\) & \(^2\)
- The addition of passive talocrural joint mobilizations resulted in significantly faster improvements in pain-free dorsiflexion range of motion, when compared to R.I.C.E. and advice protocols alone. \(^3\)
- Balance training for individuals with chronic ankle instability (a tendency toward repeated ankle sprains and recurring symptoms) enhances dynamic balance, inversion joint position sense and changes in motor neuron pool excitability. \(^4\)
- Early physiotherapy improves foot and ankle function in patients with acute ankle sprains, as measured by patient-perceived physical activity ability and satisfaction with their ankle and the Foot and Ankle Outcome Score (FAOS). \(^5\)
- Training programs are more effective than a “wait-and-see” policy in improving pain and function in patients with chronic ankle complaints following an ankle sprain. \(^6\)
- Plyometric exercise training is more effective than resistive exercises in improving functional performance in athletes after a lateral ankle sprain. \(^7\)
- Exercise rehabilitation during the first week after an ankle sprain improves early ankle function. \(^8\)
- Supervised rehabilitation following acute lateral ankle sprain improves short term (8 weeks) patient-perceived instability and pain, with similar benefits between supervised and unsupervised rehabilitation long term. \(^9\)

Consider referring to Willow Health Centre patients present with ankle sprain pathology! We are dedicated in providing Evidence-Based care, using the best of the best rehabilitation techniques to ensure patients meet their goals for a pain free and active lifestyle.

REFERENCES


