



ABOUT  
**2,000,000**  
ANKLE INJURIES  
ARE REPORTED EACH YEAR.

IT'S BELIEVED  
**15-20%**  
OF ALL ATHLETIC INJURIES  
ARE ANKLE SPRAINS.

DON'T STRAIN YOUR BRAIN WHEN CARING FOR AN

# ANKLE SPRAIN

- An ankle sprain occurs when there is a tear in the ligament, while an ankle strain occurs when there is a tear in the muscle.
- Those with a history of an ankle sprain have an approximately 3.5 times greater risk of sustaining another ankle sprain.
- Depending on the person's sport or activity, approximately 20-70% of individuals who sustain a lateral ankle sprain develop chronic ankle instability, which has been associated with ankle osteoarthritis, decreased physical activity and decreased health-related quality of life.
- Basketball, soccer, volleyball, football and gymnastics have the highest rates of ankle sprain injuries at the high school and collegiate sport level.

## KNOWING THE PHASES

**ACUTE PHASE:** Usually the first week of injury. The ankle will have pain, heat, swelling, redness and/or bruising and loss of function. During this phase, individuals should focus on interventions to improve signs of inflammation, protect the damaged ligament and introduce some exercises to improve mobility.

**SUBACUTE PHASE:** Once signs of inflammation have improved, individuals are likely entering into the subacute phase. During this phase, which can last up to 12 weeks, individuals should continue to improve their ankle mobility and begin to implement some strength and balance exercises while remaining cautious as to not reinjure the ankle.

## INITIAL TREATMENT

**Not all ankle sprains are alike, so be sure to consult a health care provider, such as an athletic trainer or physician, for an individualized treatment plan.**

**1**

Use nonsteroidal anti-inflammatory drugs to reduce pain in conjunction with ice, compression and elevation early in the rehabilitation process.

**3**

Use an external ankle support, either a functional ankle brace or tape, for up to one year after an ankle sprain.

**2**

Avoid prolonged immobilization and return early to motion after an ankle sprain.

**4**

Incorporate balance, exercise and coordination training in the rehabilitation plan as soon as weight bearing can be tolerated.

## HOW TO REDUCE THE RISK OF AN ANKLE SPRAIN

**1**

Identify your level of risk. Those with a history of an ankle sprain, increased body mass, reduced ankle strength and compete in riskier sports are at a greater risk of injury.

**3**

Brace or tape ankles during sport activities, such as games and practices. Athletes with previous ankle sprains who wore a brace or tape following injury had approximately 70% fewer ankle injuries than athletes who did not.

**2**

Have a prevention program created by an athletic trainer or qualified medical provider that focuses on balance, motor control, strength and range of motion for a minimum of three months. This is best for someone who has already sprained their ankle. Also talk with your athletic trainer about implementing a gait and movement training program.

**4**

Consider your footwear – high-top shoes offer more ankle support than low-top shoes.