

### Description

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An ankle sprain or a “rolled ankle” is a common injury, however a high ankle sprain is much less common and more often mis-diagnosed or even un-diagnosed. An ankle sprain is an injury to the ligamentous support of the ankle. When a sudden movement of the ankle exceeds its normal range of motion, the ligaments tear and a sprain occurs.

### Anatomy

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There are two main groups of ligaments around the ankle which restrict and control movement about the ankle. On the outside of the ankle there are 3 lateral ligaments which restrict the foot from rolling inwards. The lateral ligaments account for around 80% of all ankle sprains. On the inside of the ankle you have 4 ligaments collectively called the deltoid ligament, these are rarely injured.

Another small but important group of ligaments that are often overlooked are the anterior (front) and posterior (rear) syndesmotomic ligaments. These ligaments pass between the fibula and tibia (the two lower leg bones) and provide stability to the ankle in weight bearing. These ligaments are injured in around 10% of ankle sprains, often in conjunction with the lateral ligaments. Injury to the syndesmotomic ligaments is known as a **high ankle sprain**.



### Causes

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The syndesmotomic ligaments may be injured by ‘rolling’ the ankle outwards, however they are most commonly injured by twisting the foot when it is planted on the ground, for example:

- Football tackle
- Twisting in a hole
- Foot stuck on an uneven surface i.e gutter, rock, or another person’s foot.

## Prognosis.

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High ankle Sprains are generally slower to heal and have a worse prognosis than the typical lateral ankle sprain. This is due to the fact that the tibia and fibular can be split apart by weight-bearing on the foot early (in the first 2-3 weeks). Furthermore, this ligament provides greater stability to the ankle than the lateral ligaments. For these reasons, it is essential that a high ankle sprain is both diagnosed and treated early.

### Good Prognosis

- ✓ Early Detection
- ✓ Crutches for 2-3 weeks after injury
- ✓ R.I.C.E immediately after injury
- ✓ Return to sport 3-8 weeks

### Poor Prognosis

- X Undetected in first 2-3 weeks
- X Early weight-bearing
- X Fast return to sport

**Poorly diagnosed and managed high ankle sprains may result in a chronically unstable and painful ankle possibly requiring surgical intervention.**

## Treatment.

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Immediately after an ankle injury the RICE (Rest, Ice, Compression, Elevation) regime should be followed and your doctor or physiotherapist consulted.

Crutches should be obtained and used as soon as possible after the injury to prevent further damage to the ligament. This should be continued for the first 2-3 weeks post injury.

Physiotherapy treatment will vary depending on the individual requirements and severity of injury. After the thorough assessment, treatment may incorporate:

- Prescription of crutches
- Proprioceptive retraining
- Therapeutic and preventative taping
- Soft tissue massage, stretches
- Strengthening exercises
- Biomechanical correction
- Neural mobilization
- Specific joint mobilizations
- Hydrotherapy
- Gait Re-education

Return to sport may take 4-12 weeks and will depend on the type of sport, grade of tear, response to treatment and rate of repair.

**Please feel free to discuss any problems or queries with your physiotherapist or get up to date treatment options by subscribing online at [www.rehabonthenet.com](http://www.rehabonthenet.com).**