Emergency Department Online

ANKLE SPRAIN

You have been seen in the Emergency Department because of an ankle sprain. This information leaflet explains what an ankle sprain is, what causes them, what to expect, and when you should seek further medical help.

What is an ankle sprain?

An ankle sprain is a common injury that occurs when the foot twists or rolls beyond its normal range, overstretching or tearing the supporting ligaments usually on the outside of the ankle. You may experience:

- Pain
- Swelling
- Bruising
- Difficulty walking or bearing weight
- Instability, especially on uneven ground

How does it happen?

Common causes include:

- Sports involving running, jumping, or rapid direction changes
- Walking on uneven surfaces
- Wearing unsupportive footwear
- Tripping, slipping, or misstepping off curbs or stairs

The most common type of injury is when the ankle rolls in on itself (inversion), causing injury to the ligaments on the outside of the ankle.

6–12 weeks: Dynamic control & sport readiness

By this stage, most ankle sprains have healed, and you can return to your normal activities.

You should build up slowly before returning to sport and ensure you can complete all the different elements of your sport before participating fully in the activity. Further rehabilitation exercises may be needed before returning to contact sports.

If you are still experiencing pain and swelling after 6-12 weeks, contact your GP for further advice. You may benefit from further physiotherapy input.

When to seek medical advice

You should seek advice from a medical professional if:

- You have pain over the bony parts of the ankle
- You cannot walk or bear weight after one week
- The swelling or bruising does not improve

Tips for prevention

- Wear well-fitting, supportive footwear
- Continue ankle-strengthening exercises
- Warm up before activity
- Be cautious on uneven surfaces

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Self-Care: What you should do

Follow the PRICE principles (first 48–72 hours)

Protect the ankle

- Comfortable, supportive footwear is important. In severe cases, you may be given a special orthopaedic boot.

Rest

- It's important to rest the foot during the first 48 hours. However, gentle movement within your comfort range is encouraged to help maintain flexibility and prevent stiffness.

Ice

- Apply a cold compress such as an ice pack or frozen peas wrapped in a towel for 15– 20 mins every 2–3 hours. Do not apply ice directly to the skin.

Compression

- You may wish to use a snug bandage or tubi-grip during the day for comfort and to prevent swelling. Make sure this is not too tight. Some emergency departments no longer recommend this and advise comfortable footwear instead.

Elevation

- Raise your ankle above the level of the hip when possible, to reduce swelling

Early movement and weight-bearing

Start moving the ankle gently within pain limits to avoid stiffness and improve circulation. As soon as you can tolerate it, begin putting weight through the foot. You should avoid using crutches wherever possible.

Medication

Simple painkillers bought over the counter, such as paracetamol, can help manage the pain. If you have any questions or require further painkillers, speak with your doctor or pharmacist.

What to avoid (first 48-72 hours)

Follow the avoid HARM principle to remember what not to do

- **Hot baths or heat packs** - this can increase blood flow and inflammation in the initial stages
- **Alcohol** can increase blood flow and swelling, and reduce healing
- **Massage** during the first 72 hours should be avoided. After this period, it may be beneficial
- **High-impact exercise** or running can make the injury worse

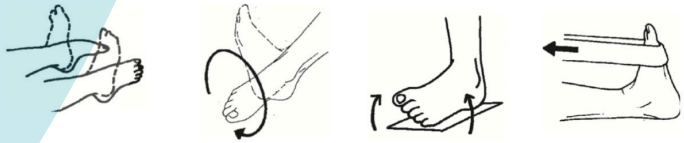
Rehabilitation exercises

The rate of recovery varies between each individual and it is important to start gentle rehabilitation exercises at an early stage.

0–2 weeks: Mobility and range

Perform exercises 3–4 times daily unless otherwise stated. Avoid pushing into pain.

1. Foot up/down movement – Repeat 10 times
2. Foot circles – 10 reps each direction
3. Rock side to side – Inner/outer edge lift while foot on floor
4. Towel stretch – Gently pull foot towards you with a towel



2–6 weeks: Strength & balance

Some examples of exercises for strength and balance include:

- Balance practice – Stand on the injured foot with support. Progress to no support and then with eyes closed.
- Heel raises – Stand and lift heels; start with both legs and progress to one
- Resistance band work – Pull foot outward with a resistance band
- Ball flicks – Use your foot to flick a ball gently to the side by turning the foot outwards