

Ankle sprain



Summary points to remember:

- Use this link or QR code to watch a video about an ankle sprain: thermh.org.au/vfc
- Ankle sprains are very common and are usually caused by twisting or rolling the ankle
- Early weight-bearing is safe and recommended as soon as possible after an ankle sprain
- This brochure provides some information to assist with the management and rehabilitation of your injury. While it contains the recommended information, it does not contain all available information about your injury and is not a substitute for specific advice from the Virtual Fracture Clinic in respect of your injury
- All treatment options have risks and benefits
- If you have any concerns about the progress of your rehabilitation, contact the Virtual Fracture Clinic promptly
- Do not continue the exercises in the brochure if:
 - You experience increasing pain (some discomfort is common)
 - Your condition has deteriorated in any way since you last consulted the Virtual Fracture Clinic
 - You have a new injury or condition and have not consulted the Virtual Fracture Clinic about it
- This information is only designed for patients who are currently being treated by the Virtual Fracture Clinic at the Royal Melbourne Hospital (RMH)
- If you do not understand the information seek clarification from the Virtual Fracture Clinic
- Patients should be aware that the suggested management is not guaranteed to provide any improvement in your condition
- Keep this brochure as you may need to read it again



Virtual Fracture Clinic

The Virtual Fracture Clinic gives fast access to a specialist orthopaedic opinion without having to visit the RMH in person.

An orthopaedic surgeon will review your case and a staff member will contact you to discuss your management plan.

Your diagnosis is: ankle sprain

Ankle sprains are very common. They are usually caused by twisting or rolling the ankle. This may happen playing sport or during a fall.

Early management: the first 72 hours

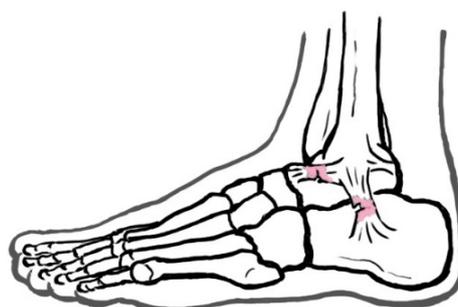
It is normal for your ankle to become bruised and swollen. This will settle over a few weeks. Follow the RICE (rest, ice, compression, elevation) guidelines to help with any pain and swelling:

Rest: Spend most of your time lying down, resting. Avoid any activity that increases your pain, such as long walks or standing for a long time.

Ice: Ice your ankle for **20 minutes every one to two hours**. Use an ice pack, bag of frozen vegetables or crushed ice wrapped in a towel. Do not place ice directly on your skin. Continue for **three to 10 days** after your injury.

Compression: Wear a compression bandage or Tubigrip (an elastic stocking you can buy at the pharmacy) on your foot and ankle. If you experience pins and needles, numbness or skin colour changes, loosen the compression as it may be too tight.

Elevation: Position your ankle higher than your heart (see photo to the right).



CAMboot

A CAMboot can be used to support your ankle while it heals, but is not always required. Wear the boot for **no more than two weeks**.

Remove the boot for showers and sleeping, if comfortable.



To learn how to fit the boot visit:
fracturecare.co.uk/general-advice/fitting-your-boot

Walking

It is safe to put full weight on your ankle with or without a CAMboot (the medical term for this is 'weight bear as tolerated').

You can also use crutches to reduce your pain or assist your balance, if needed.



Medication

Simple medication such as paracetamol or NSAIDs (non-steroidal anti-inflammatory drugs) may help to control your pain.

Speak with your General Practitioner (GP, also called your local doctor or family doctor) or pharmacist about medication options.

Smoking

Research shows that smoking increases the risk of poor healing after an injury. Stopping smoking will improve the chance of a good outcome.

For further information on quitting smoking visit quitnow.gov.au or speak with your GP.

Rehabilitation exercises: after 48-72 hours

Remove the boot and perform these exercises **four times a day**:

- Point your foot up and then down. Repeat 10 times

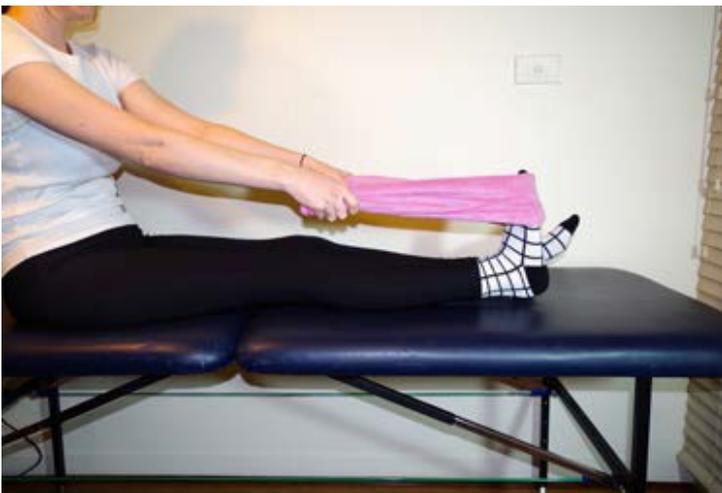


- Turn your feet towards each other and

then away from each other. Repeat 10 times



- Use a towel to gently stretch your foot back towards you. Hold for 10 seconds. Repeat five times



After one week, add this exercise

- Stand near something stable (such as the back of a chair or bench). Try to balance with all of your weight on your injured leg. Hold for 30 seconds. Repeat five times. To make the exercise harder, close your eyes



Physiotherapy

Most patients will benefit from physiotherapy treatment following an ankle sprain.

Speak with your GP about physiotherapy options in your area, or contact the Virtual Fracture Clinic to arrange physiotherapy at the RMH.

Expected return to daily activities

Different people recover from broken bones at different rates. Most ankle sprains will heal in six to eight weeks.

Return to driving

- Automatic car
 - If your **left** ankle is sprained you may return to driving immediately
 - If your **right** ankle is sprained you may return to driving when you no longer need the CAMboot **and** your right leg is strong enough to perform an emergency stop
- Manual car
 - You may return to driving when you no longer need the CAMboot **and** your right leg has enough strength to perform an emergency stop

Return to work

The amount of time you will need off work relates to the severity of your injury and your work requirements. Discuss your return-to-work plan with your GP and employer.

As a guide:

- Manual workers: If you need to walk on uneven ground or climb it may take six weeks to return to normal duties
- Desk workers: You can return as soon as your pain allows

Return to sport

It is recommended that you see a physiotherapist for a guided return-to-sport program.

Longer term recovery and expectations

Most people achieve a normal function after this injury. It is possible that you could have mild ongoing discomfort or limp. If you still have significant pain or limitation **three to six months** after your injury despite physiotherapy and rehabilitation you may need a review with an orthopaedic specialist. Discuss this with your GP.

Contact

Contact the Virtual Fracture Clinic if:

- You have not heard from us **two working days** after your Emergency Department visit
- Your pain is so bad that medication and RICE (rest, ice, compression and elevation) do not help
- You notice increasing pain without a cause after it was improving
- You notice major numbness, pins and needles, or changes in circulation in your foot or ankle
- Your symptoms are still bad after six weeks

Contact

Virtual Fracture Clinic
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Practitioner / Patient notes

