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"treating the cause of your problem, not just the symptoms"

Joint and Ligament Damage in Ankle

Last week I discussed what muscles and tendons are commonly injured when you sprain your ankle. As promised, this week I will discuss the ligaments (tough cord-like structures that attach one bone to another bone, as in your knee or ankle) that can be injured.

When you turn or twist your ankle inward, excessive strain can be put on the ligaments at the outside of the ankle, particularly the "talofibular ligament" (see diagram). The severity of the injury will dictate whether this ligament is stretched/sprained mildly, severely, or perhaps even torn completely. When this ligament is severely sprained or completely torn, other ligaments such as the "calcaneofibular ligament" (see diagram) will likely also be damaged. In very severe cases, the outside bone (fibula) of the lower leg that makes up part of the ankle joint may even break.

When I examine an ankle sprain, the severity is often classified as a "grade 1, grade 2, or grade 3". What category your ankle will fall into depends whether or not the ligaments are just sprained or if they are torn. Orthopedic tests that all chiropractors are familiar with can make an accurate diagnosis for you. Once the diagnosis is established, the treatment can commence. Initially, you should not use that foot for walking or standing. Ice (package of frozen peas or corn) should be applied at 20-minute intervals, three to four times a day, with at least 20 minutes between each application. As well, the foot should be elevated and a tensor bandage should be wrapped around it, but not too tightly. In my office, chiropractic mobilization, interferential current, ultrasound, and other forms of treatment are used. Moderate to severe ankle ligament sprains will take quite some time to heal properly. This is because ligaments do not receive a good supply of blood and other important "stuff" that would normally allow them to heal quickly.

An often-ignored part of treating an ankle sprain is the rehabilitation of it. All joints have tiny nerve endings in them that communicate with your brain. Their job is to tell the brain what position a particular joint is in without you having to look at it. For example, if you move your ankle in a downward position, your

brain automatically knows what position it is in. When your ankle is injured, these nerve endings become “off-line” and send inaccurate information to your brain. The brain is responsible for controlling the muscles that keep the ankle in its most stable position when you play sports or even walk. If this communication between your ankle and brain is not precise, you will be much more likely to turn or sprain your ankle again, and again, and again. Each time it happens, the nerve endings become further “off-line” and their communication with the brain deteriorates even further. A chiropractor can show you how to retrain these nerve endings easily at home or in their office.

Have you sprained your ankle and you think it has not healed properly? Have you strengthened the muscles we talked about last week that support the ankle? Have you “retrained” your ankle’s nerve endings to accurately communicate with your brain? Can you run in a tight figure eight pattern in both directions without pain or a sensation of vulnerability in the ankle? If you answered no to any of these questions, you may wish to call our office.

