

Chronic Ankle Laxity

What is chronic ankle laxity?

Chronic ankle laxity is looseness and instability of the ankle joint.

How does it occur?

Chronic ankle laxity occurs because of previous ankle injuries. Ankles that have become loose or unstable usually have had several severe sprains where ligaments have been torn. The more sprains that you have, the looser your ankle will become. Because of the stretched or torn ligaments, the ankle joint doesn't have its natural support and may twist or sprain more easily.

What are the symptoms?

Symptoms can include:

- ▶ looseness of the ankle
- ▶ feeling your ankle is giving way
- ▶ recurrent swelling
- ▶ pain.

How is it diagnosed?

Your provider will ask you about injuries you have had and examine your ankle. The injured ankle may be looser, more swollen, or more painful than your other ankle.

Your provider may take an x-ray of your ankle. You may have an MRI or CT scan of your ankle to see it in closer detail.

How is it treated?

At first, chronic ankle laxity is treated with proper rehabilitation exercises. It is very important after an injury to do exercises that work on range of motion, strength, balance, and coordination.

Treatment may also include:

- ▶ an ankle brace
- ▶ anti-inflammatory medicine (such as ibuprofen)
- ▶ ice and elevation.

If your ankle remains loose or unstable, surgery can be done to reconstruct the damaged ligaments. This will make the ankle more stable and stop the feeling that your ankle is giving way.

Without treatment, you may keep injuring and twisting your loose ankle. These repeated twists may eventually cause wear and tear to your ankle joint.

When can I return to my sport or activity?

The goal of rehabilitation is to return you to your sport or activity as soon as is safely possible. If you return too soon you may worsen your injury, which could lead to permanent damage. Everyone recovers from injury at a different rate. Return to your sport or activity will be determined by how soon your ankle recovers, not by how many days or weeks it has been since your last ankle injury occurred. In general, the longer you have symptoms before you start treatment, the longer it will take to get better.

You may safely return to your sport or activity when, starting from the top of the list and progressing to the end, each of the following is true:

- ▶ You have full range of motion in the injured ankle compared to the uninjured ankle.
- ▶ You have full strength of the injured ankle compared to the uninjured ankle.
- ▶ You can jog straight ahead without pain or limping.
- ▶ You can spring straight ahead without pain or limping.
- ▶ You can do 45-degree cuts, first at half-speed, then at full-speed.
- ▶ You can do 20-yard figures-of-eight, first at half-speed, then at full-speed.
- ▶ You can do 90-degree cuts, first at half-speed, then at full-speed.
- ▶ You can do 10-yard figures-of-eight, first at half-speed, then at full-speed.
- ▶ You can jump on both legs without pain and you can jump on the injured leg without pain.
- ▶ You may need to wear a brace or tape your ankle while playing sports.

How is chronic ankle laxity prevented?

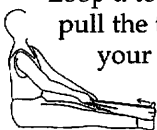
The most important way to prevent chronic ankle problems is by doing proper ankle exercises after an

injury. For some people it is important to continue the rehabilitation exercises for a long time after their injury.

Chronic Ankle Laxity Rehabilitation Exercises

As soon as you can tolerate pressure on the ball of your foot, begin stretching your ankle using the towel stretch. When this stretch is too easy, try the standing calf stretch and soleus stretch.

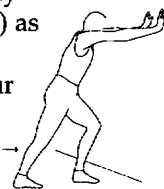
1. TOWEL STRETCH: Sit on a hard surface with your injured leg stretched out in front of you. Loop a towel around the ball of your foot and pull the towel toward your body keeping your knee straight. Hold this position for 15 to 30 seconds then relax. Repeat 3 times.



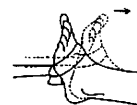
4. ANKLE RANGE OF MOTION: Sitting or lying down with your legs straight and your knee toward the ceiling, move your ankle up and down, in and out, and in circles. Only move your ankle. Don't move your leg. Repeat 10 times in each direction. Push hard in all directions.



2. STANDING CALF STRETCH: Facing a wall, put your hands against the wall at about eye level. Keep the injured leg back, the uninjured leg forward, and the heel of your injured leg on the floor. Turn your injured foot slightly inward (as if you were pigeon-toed) as you slowly lean into the wall until you feel a stretch in the back of your calf. Hold for 15 to 30 seconds. Repeat 3 times. Do this exercise several times each day.



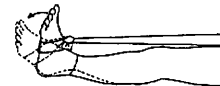
5. RESISTED DORSIFLEXION: Sit with your injured leg out straight and your foot facing a doorway. Tie a loop in one end of the tubing. Put your foot through the loop so that the tubing goes around the arch of your foot. Tie a knot in the other end of the tubing and shut the knot in the door. Move backward until there is tension in the tubing. Keeping your knee straight, pull your foot toward your body, stretching the tubing. Slowly return to the starting position. Do 3 sets of 10.



3. STANDING SOLEUS STRETCH: Stand facing a wall with your hands at about chest level. With both knees slightly bent and the injured foot back, gently lean into the wall until you feel a stretch in your lower calf. Once again, angle the toes of your injured foot slightly inward and keep your heel down on the floor. Hold this for 15 to 30 seconds. Return to the starting position. Repeat 3 times.

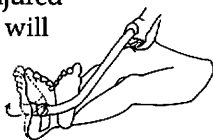


6. RESISTED PLANTAR FLEXION: Sit with your leg outstretched and loop the middle section of the tubing around the ball of your foot. Hold the ends of the tubing in both hands. Gently press the ball of your foot down and point your toes, stretching the tubing. Return to the starting position. Do 3 sets of 10.

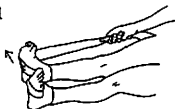


You can do the next 5 exercises when your ankle swelling has stopped increasing.

7. RESISTED INVERSION: Sit with your legs out straight and cross your uninjured leg over your injured ankle. Wrap the tubing around the ball of your injured foot and then loop it around your uninjured foot so that the tubing is anchored there at one end. Hold the other end of the tubing in your hand. Turn your injured foot inward and upward. This will stretch the tubing. Return to the starting position. Do 3 sets of 10.



8. RESISTED EVERSION: Sit with both legs stretched out in front of you, with your feet about a shoulder's width apart. Tie a loop in one end of the tubing. Put your injured foot through the loop so that the tubing goes around the arch of that foot and wraps around the outside of the uninjured foot. Hold onto the other end of the tubing with your hand to provide tension. Turn your injured foot up and out. Make sure you keep your uninjured foot still so that it will allow the tubing to stretch as you move your injured foot. Return to the starting position. Do 3 sets of 10.

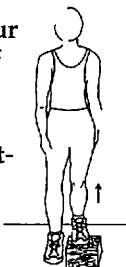


You may do the rest of the exercises when you can stand on your injured ankle without pain.

9. HEEL RAISES: Balance yourself while standing behind a chair or counter. Raise your body up onto your toes and hold it for 5 seconds, then slowly lower yourself down. Repeat 10 times. Do 3 sets of 10.

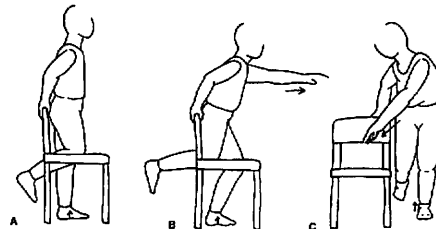


10. STEP-UP: Stand with the foot of your injured leg on a support (like a block of wood) 3 to 5 inches high. Keep your other foot flat on the floor. Shift your weight onto the injured leg and straighten the knee as the uninjured leg comes off the floor. Lower your uninjured leg to the floor slowly. Do 3 sets of 10.



11. STATIC AND DYNAMIC BALANCE EXERCISES

- A. Place a chair next to your non-injured leg and stand upright. (This will provide you with balance if needed.) Stand on your injured foot. Try to raise the arch of your foot while keeping your toes on the floor. Try to maintain this position and balance on your injured side for 30 seconds. This exercise can be made more difficult by doing it on a piece of foam or a pillow, or with your eyes closed.
- B. Stand in the same position as above. Keep your foot in this position and reach forward in front of you with your injured side's hand, allowing your knee to bend. Repeat this 10 times while maintaining the arch height. This exercise can be made more difficult by reaching farther in front of you. Do 2 sets.
- C. Stand in the same position as above. While maintaining your arch height, reach the injured side's hand across your body toward the chair. The farther you reach, the more challenging the exercise. Do 2 sets of 10.



12. JUMP ROPE: Jump rope landing on both legs for 5 minutes, then on only the injured leg for 5 minutes.



13. SINGLE-LEG BALANCE: Stand without any support and attempt to balance on your injured leg. Begin with your eyes open and then try to perform the exercise with your eyes closed. Hold the single-leg position for 30 seconds. Repeat 3 times. When you have mastered this, try doing this exercise standing on a pillow.

