

7 SIMPLE WAYS TO HEAL ANKLE SPRAINS

For The Soccer Athlete



LYMPUS
MOVEMENT
PERFORMANCE

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#1: ANKLE SPRAIN INJURIES

Ankle sprain injuries are the most common athletic injury, accounting for 25% of all injuries. The risk of ankle injuries in the sport of soccer are as high as 30%. The lateral (or outside) ankle ligaments are the most commonly injured, followed by fractures, and medial sprains.

#2: IMMEDIATE REHAB PROTOCOL

Immediate physical therapy evaluation and treatment can accelerate an athlete's recovery and return to play with the proper progression of load and volume. Every athlete and their recovery times are different and ultimate goal is to return the athlete safely and decreased risk for further injuries.

#3: PROPRIOCEPTION/ BALANCE EXERCISES

Single-Leg Balance. Standing on one leg might seem elementary but it's one of the best ways to strengthen the stabilizing muscles in your ankle and feet, which are essential for protecting the joint. Once balancing on one foot becomes easy on a firm flat surface you can progress to an uneven, unstable surface.

#4: POSTERIOR CHAIN/GLUTE ACTIVATION

The largest of the posterior ankle muscles is the gastrocnemius. This muscle affects both the ankle and knee joint by controlling plantarflexion and inversion at the ankle. The soleus also aids with plantarflexion, while the minor posterior muscles of the ankles all act in plantarflexion and inversion.

#5: FOOT INTRINSICS ACTIVATION

A must post- ankle sprain injury is to train in your barefoot to improve. Our feet contain a large number of information producing sensors. We can essentially train our feet to better understand our body position and movements by going barefoot more frequently.

Along with this is working on creating a 'short foot' or half dome shape under the arch of the foot in all movements- squats, deadlifts, toe walks, etc.

#6: HIP ROTATORS/ STABILIZERS FOR FOOT CONTROL

One of our main ankle issues is that we can't control our pelvis during dynamic tasks. Activation of our glute med., glute max and deep hip stabilizers is essential.

#7: IMPROVE ANKLE MOBILITY

Both ankle dorsiflexion and plantarflexion can become limited after an ankle. Banded ankle wall drills for mobility need to be integrated daily.

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