

Lateral Collateral Ligament Sprain

What is lateral collateral ligament sprain?

A sprain is a joint injury that causes a stretch or tear in a ligament, a strong band of tissue connecting one bone to another. The lateral collateral ligament is located on the outer side of the knee. It attaches the bottom portion of the thigh bone (femur) to the outside bone in the lower leg (fibula).

Sprains are graded I, II, or III depending upon the severity of the sprain:

- grade I sprain: pain with minimal damage to the ligaments
- grade II sprain: more ligament damage and mild looseness of the joint
- grade III sprain: complete tearing of the ligament and the joint is very loose or unstable.

How does it occur?

The lateral collateral ligament can be injured by a twisting motion or from a blow to the inner side of the knee.

What are the symptoms?

There will often be pain on the outer side of your knee. Your knee may be swollen and tender. You may have the feeling of your knee giving way. You

might hear or feel a pop or snap at the time of injury.

How is it diagnosed?

Your doctor will examine your knee for tenderness over the outer side of your knee. Your doctor will gently move your knee around to see if the knee joint is stable and if the liga-

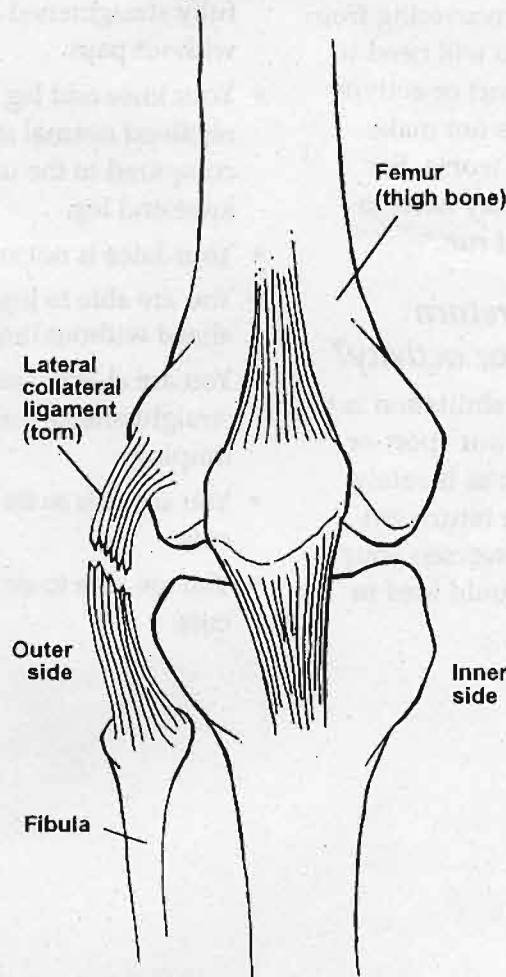
ment is stretched or torn. Your doctor may order an x-ray or magnetic resonance image (MRI) of your knee.

How is it treated?

Treatment may include:

- applying ice packs to your knee for 20 to 30 minutes every 3 to 4 hours for 2 to 3

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days or until the pain and swelling go away

- elevating your knee by placing a pillow underneath it
- wrapping an elastic bandage around your knee to keep the swelling from getting worse
- using crutches until you can walk without pain
- taking anti-inflammatory medication or a pain medication prescribed by your doctor
- doing rehabilitation exercises.

While you are recovering from your injury, you will need to change your sport or activity to one that does not make your condition worse. For example, you may need to swim instead of run.

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 knee recovers, not by how many days or weeks it has been since your 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:

- Your injured knee can be fully straightened and bent without pain.
- Your knee and leg have regained normal strength compared to the uninjured knee and leg.
- Your knee is not swollen.
- You are able to jog straight ahead without limping.
- You are able to sprint straight ahead without limping.
- You are able to do 45-degree cuts.
- You are able to do 90-degree cuts.

- You are able to do 20-yard figure-of-eight runs.
- You are able to do 10-yard figure-of-eight runs.
- You are able to jump on both legs times without pain and jump on the injured leg without pain.

If you feel that your knee is giving way or if you develop pain or have swelling in your knee, you should see your doctor.

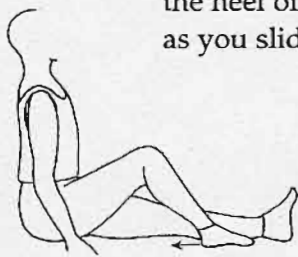
How can I prevent a lateral collateral ligament sprain?

Unfortunately, most injuries to the lateral collateral ligament occur during accidents that are not preventable. However, you may be able to avoid these injuries by having strong thigh and hamstring muscles, as well as by maintaining a good leg stretching routine. In activities such as skiing, be sure that your ski bindings are set correctly by a trained professional so that your skis will release when you fall.

Lateral Collateral Ligament Sprain Rehabilitation Exercises

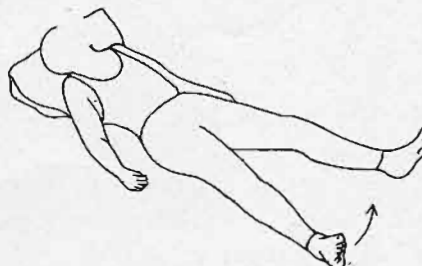
You may do exercises 1 through 4 right away. You may do exercise 5 when your knee pain has decreased.

1. Heel slide: Sit on a firm surface with your legs straight in front of you. Slowly slide the heel of your injured leg toward your buttocks by pulling your knee to your chest as you slide. Return to the starting position. Repeat 20 times.



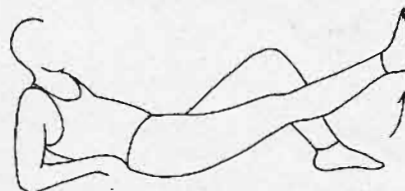
Heel slide

2. Hip abduction and adduction: Lie on your back with your legs straight out in front of you and your toes pointed toward the ceiling. Slide your injured leg out to the side as far as possible. Slide it back to the starting position. Repeat 10 times.



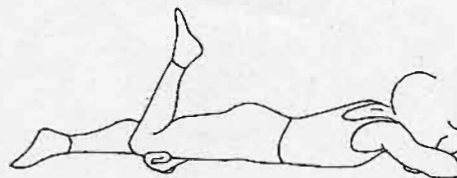
Hip abduction and adduction

3. Straight leg raise: Sit on the floor with your injured leg straight and your other leg bent, with your foot flat on the floor. Move the toes of your injured leg toward you as far as you can, while pressing the back of your knee down and tightening the muscles on the top of your thigh. Raise your leg 6 to 8 inches off the floor and hold for 5 seconds. Slowly lower it back to the floor. Repeat 20 times.



Straight leg raise

4. Prone knee flexion: Lie on your stomach with a towel rolled up underneath your injured thigh, just above your knee. Slowly bend your knee and try to touch your buttock with your heel. Return to the starting position. You can challenge yourself by wearing ankle weights. Repeat 20 times.



Prone knee flexion



Wall squat

5. Wall squat: Stand with your back, shoulders, and head against a wall and look straight ahead. Keep your shoulders relaxed and your feet 1 foot away from the wall and a shoulder's width apart. Keeping your head against the wall, slowly squat until you are almost in a sitting position. Your thighs will not yet be parallel to the floor. Hold this position for 10 seconds. Slowly slide back up. Repeat 20 times.