
Education

Broken Ankle

What is a broken ankle?

A broken ankle is a break in one or more of the bones that make up the ankle joint. These bones are the tibia, fibula, and talus.

How does it occur?

Ankle breaks, or fractures, can occur in many ways: for example, by falls, contact sports and exercise injuries, and force from a blow.

There are many types of fractures, which determine the severity of the injury and its treatment:

- nondisplaced fracture: the broken pieces of bone remain properly aligned
- displaced fracture: the broken pieces of bone are not properly aligned
- comminuted fracture: there are more than two pieces of bone at the fracture.
- compound (open) fracture: one end of the broken bone has broken through the skin.
- closed fracture: neither end of the broken bone has pierced the skin.
- impacted fracture: the ends of the broken bone are driven into each other.
- avulsion fracture: the muscle or ligament has pulled a portion of the bone away from where it was originally attached.
- pathological fracture: the bone has been weakened or destroyed by disease (such as osteoporosis) so that the bone breaks easily.

What are the symptoms?

Symptoms of an ankle fracture include:

- a snapping or popping sound at the time of the injury
- loss of function (hurts to move the ankle)
- pain
- tenderness
- swelling
- deformity (sometimes)
- discolored skin, or bruising, which appears hours to days after the injury.

Rarely, you may have an open wound with an ankle fracture.

How is it diagnosed?

To diagnose an ankle fracture, the health care provider will review your symptoms, ask about how the injury occurred, and examine you. He or she will also order x-rays. Several different views of the bone may be taken to pinpoint the fracture.

How is it treated?

The immediate emergency treatment for a fractured ankle is immobilization (keeping it from moving), elevation, compression (wrapping it with an elastic or Ace bandage), and the application of ice packs.

The health care provider may need to set your ankle bone back into its proper place and put you in a cast for 6 to 8 weeks. If the fracture is not too severe, you may be able to walk in the cast after a short period.

If the ankle bone cannot be aligned perfectly before it is ready for a cast, surgery will be necessary.

In the first 2 to 3 weeks after the injury, be sure to keep your ankle elevated on pillows and place ice packs on top

of the cast for 20 to 30 minutes every 3 to 4 hours to help reduce swelling.

You should also:

- Make sure the cast does not get wet. Cover the cast with plastic when you bathe.
- Use crutches or a cane, as directed by your health care provider. He or she will tell you how much weight you can put on your leg, if any.
- Not scratch the skin around the cast or poke things down the cast. This could cause an infection.

Immobilization of a leg in a cast can cause the joints to stiffen and the muscles to weaken in both legs. After you come out of the cast, your health care provider or physical therapist will recommend exercises for both legs that will improve their strength and range of motion.

How can I take care of myself?

To help take care of yourself, follow the full course of treatment your health care provider prescribes. Also, follow these guidelines:

- Get plenty of rest.
- Elevate the leg when possible to reduce any swelling.

Call your health care provider immediately if:

- You have swelling above or below the fracture.
- Your toenails or feet turn grey or blue and stay grey or blue even when your leg is elevated.
- You have numbness or complete loss of feeling in the skin below the fracture.
- You have lingering pain at the site of the fracture under the cast, or increasing pain not helped by elevation or pain medicine.
- You have burning pain under the cast.

How long will the effects last?

When the cast is removed, it usually takes a few weeks of doing physical therapy exercises for your ankle to fully recover. If you had surgery and your cast was on for longer than 6 weeks, your rehabilitation will last longer.

When can I return to my normal activities?

Everyone recovers from an injury at a different rate. Return to your activities will be determined by how soon your ankle recovers, not by how many days or weeks it has been since your injury has occurred. The goal of rehabilitation is to return you to your normal activities as soon as is safely possible. If you return too soon you may worsen your injury.

You may safely return to your normal activities 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 leg compared to the uninjured leg.
- You have full strength of the injured leg compared to the uninjured leg.
- You can walk straight ahead without pain or limping.

How can I help prevent an ankle fracture?

Unfortunately, most foot sprains occur during accidents that are not preventable. However, it is important to wear proper fitting footwear and to avoid running or playing on uneven surfaces.

Sports Medicine Advisor 2006.4; Copyright © 2006 McKesson Corporation and/or one of its subsidiaries. All Rights Reserved. Developed by McKesson Provider Technologies. This content is reviewed periodically and is subject to change as new health information becomes available. The information is intended to inform and educate and is not a replacement for medical evaluation, advice, diagnosis or treatment by a healthcare professional.