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Lateral Ankle Sprain

Outer ankle ligament

The classic rolled ankle that everyone under-rehabs and almost everyone will roll again because of it.

INJURY
Lateral Ankle Sprain

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SERIES
Injury Hub: ***Top 20***

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14 — INJURYHUB

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CAN I KEEP RUNNING?

Do not run if you are limping, cannot hop, or cannot trust the ankle. Return requires pain-free walking, solid balance, and progressive loading tolerance. Hopping on the spot is a good test.

TYPICAL TIMELINE

Grade 1: about 1 to 3 weeks. Grade 2: about 3 to 6 weeks. Grade 3: often 6 to 12 weeks or more depending on stability and what structures are involved.

WHAT IT IS: IN LIESEL'S WORDS

A lateral ankle sprain happens when you roll the foot inward too far, overstretching or tearing the ligaments on the outside of the ankle. The ATFL, the anterior talofibular ligament, is the one that goes first in most cases. It sits between the outer ankle bone and the top of the foot and is the first line of defence against that inward roll.

This is a traumatic injury rather than a pure overuse problem, but the rehab failure rate is what makes it chronic. Most runners think a rolled ankle is a two-week problem. They rest, the swelling goes down, and they go back out. But the ligament has not been retrained, the balance has not been restored, and the ankle is now more likely to roll again. And again.

The sprain is not the problem. The under-rehab is.

> **LIESEL'S NOTE**
> *I have seen more recurrent ankle sprains caused by skipping the balance and hopping phase than by any other mistake. That phase feels boring because the pain is already gone. Do it anyway.*

HOW IT USUALLY FEELS

You will usually know this one the moment it happens. There is a sudden inward twist, often on a rock, a root, a curb, or just an uneven patch of ground, followed by sharp outer-ankle pain and rapid swelling.

- Sudden outer-ankle pain, often with a pop or crack at the moment of injury.
- Swelling over the outer ankle, sometimes significant and fast.
- Bruising appearing within 24 to 48 hours, sometimes tracking toward the toes.
- Tenderness below and in front of the outer ankle bone.
- The ankle may feel unstable or like it wants to give way on uneven ground.
- Hopping on the injured leg is painful or impossible in the early days.

WHY RUNNERS GET THIS: REAL REASONS

Trail running is the most common context, but road runners roll ankles on curbs, potholes, and cambered surfaces too. The usual culprits:

- Uneven surfaces, trail running, fatigue on descents, or a moment of inattention.
- Previous ankle sprain that was not fully rehabbed, leaving balance and strength deficits.
- Poor peroneal muscle strength, the muscles that resist that inward roll.
- Fatigue late in a run or race when reaction time and proprioception drop.
- Rushing back after a prior sprain before balance and hop tolerance were restored.

> **REALITY CHECK**
> *A grade 1 sprain treated with rest alone has a recurrence rate that is uncomfortably high. The ankle needs to be retrained, not just rested. Balance work is not optional.*

THE BIGGEST MISTAKES I SEE

- Going back to running as soon as the pain settles, without checking balance or hop tolerance.
- Skipping the proprioception and hopping phase entirely because it feels unnecessary.
- Treating every sprain as grade 1 without checking whether ligaments or bone are involved.
- Relying on a brace forever rather than rebuilding the strength and control the brace is replacing.
- Never addressing the hip and calf weakness that makes the ankle vulnerable in the first place.

THE ROAD BACK TO RUNNING

The return sequence matters as much as the timeline. Skipping phases is the main reason this injury becomes recurrent.

- **Reduce swelling and restore walking first.** Ice, compression, and elevation early. Keep moving gently. Full rest usually slows recovery.
- **Restore ankle motion and single-leg control.** Gentle range-of-work exercises, progressing to single-leg balance on a flat surface before you run.
- **Pass the hopping test before you run.** Hopping on the spot on the injured ankle, pain-free, with a steady landing. If you cannot do this, you are not ready to run.
- **Return to flat easy running first.** Predictable flat surfaces before trails, curbs, or technical ground.
- **Trails and descents come last.** Only when you can hop, change direction, and balance confidently. Not before.

QUICK TIP

Single-leg balance with eyes closed is a simple home test for readiness. If you wobble significantly more on the injured side after 4 weeks of rehab, you are not ready to return to trail.

REHAB PLAN — KEY EXERCISES

Progress through these phases in order. Do not move to the next phase until the current one is genuinely comfortable. The hopping phase is non-negotiable before returning to uneven ground.

Ankle Alphabet Seated, draw alphabet with the foot. Restores motion gently. **2 x full alphabet · Daily, early phase**	**Single-Leg Balance** Eyes open on flat surface, progress to eyes closed. **3 x 30 sec · Daily**
Band Eversion Resistance band around foot, slow outward push against band. **3 x 15 · Daily**	**Calf Raise (Two-Leg)** Full range, controlled descent. Progress to single-leg. **3 x 15 · Daily**
Single-Leg Hop Hop on spot, land softly and hold. Progress to forward hops. **3 x 10 · 3x week, late phase**	**Lateral Band Walks** Band at ankles, athletic stance, step sideways with control. **2 x 15 steps each way · 3x week**

CROSS-TRAINING THAT WORKS

Stay fit without making it worse. These are generally well tolerated through most of the recovery:

- Pool running and swimming, zero ankle load.
- Cycling on flat routes if weight bearing is comfortable.
- Upper body conditioning throughout.
- Strength work for the whole leg, hips and calf included.
- Avoid: technical trail running, cambered roads, and any surface that demands ankle reaction before control is restored.

LIESEL'S PEN

I always tell runners that the rolled ankle is not the injury that derails them. It is the decision to skip the boring part of the rehab that does it. When the swelling goes down and the pain fades, that is exactly the moment the real work needs to happen. Balance drills, single-leg strength, hopping progressions. None of it is exciting. All of it is what separates a runner who comes back solid from one who rolls the same ankle three times a year for the rest of their running life. I have treated both. The difference is almost always whether they did the work after the pain stopped.

INJURYHUB · QUICK REFERENCE

Lateral Ankle Sprain

Outer ankle ligament — everything you need at a glance

PAIN LOCATION	COMMON TRIGGERS
Outer ankle, around and below the lateral malleolus. Swelling often rapid. Bruising within 24 to 48 hours.	*Uneven surfaces, fatigue, previous sprain with incomplete rehab, poor peroneal strength.*
KEY FIX	**RECOVERY TIMELINE**
Early protection plus functional rehab. Do not skip the balance and hopping phase before returning to running.	*Grade 1: 1 to 3 weeks. Grade 2: 3 to 6 weeks. Grade 3: 6 to 12 weeks or more. Timeline depends on stability and rehab quality.*

REAL TALK FROM LIESEL

Almost every recurrent ankle sprain I see could have been prevented by doing the balance and hop work after the first one. The ankle needs to relearn how to react, not just how to stop hurting. That relearning takes a few weeks of deliberate work. Skip it and you are just waiting for the next roll.

EVIDENCE BASE

Acute Ankle Sprain in Athletes: Clinical Aspects and Algorithmic Approach (2020)
NATA Position Statement on Conservative Management and Prevention of Ankle Sprains (2013)
Rehabilitation of the Ankle After Acute Sprain or Chronic Instability (2002)

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