

Ankle Injury: Causes, Treatment and Surgery

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Ankle injury is among the most common injuries reported by primary care providers and emergency departments and may result in long-term disability. Ankle sprains are rarely common in most people, but they do occur more frequently in sports. Understanding the anatomy of the ankle ligaments is essential for proper diagnosis and treatment. Ankle ligament injury is the most common cause of severe ankle pain. Chronic ankle pain often finds their cause in the loosening of some of the ankle joints. The lines around the ankle are connected, depending on the anatomic orientation, and each ankle ligaments are discussed in detail. Indications for ankle arthroscopy have increased as more information has been obtained in the treatment of various pathologic associations. There has been significant progress in arthroscopic surgery of the ankles in recent decades, especially to allow surgical procedures to be performed with fewer complications and to quickly return to work and play. We expect that the growing indications of arthroscopic surgical procedures for the ankle combined with the further development of biomedical devices to improve these processes will lead to improved patient outcomes in the future. New technological advances and a deeper understanding of the pathobiomechanics involved in chronic lateral ankle instability have allowed for the extension of arthroscopic techniques in this common pathology. As experience is gained and the effects within the patient profile are understood, the authors feel that the arthroscopic method of lateral ankle stiffening may indicate that it is superior to second-line methods of risk and traditional complications reduced within rare arthroscopic methods. Additionally, the arthroscopic approach may allow for a faster return to the ballistic game and reduce recovery time. Reconstruction of the arthroscopic lateral ankle ligament becomes an increasingly accepted method of surgical management of lateral ankle instability. The condition of the lateral ligaments including mechanical instability and ankle cartilage was significantly lower in the ankles with symptomatic os subfibulare than in those with chronic lateral

instability. Symptoms of an ankle fracture can be similar to those of ankle sprains, although they are usually very common in comparison. It is very rare for the ankle joint to disintegrate where there is only ligamentous injury. The structures entering its formation of the lower part of the tibia and its malleolus, the malleolus of the fibula, and the flexible ligament, together form a mortise to accommodate the upper convex area of the talus and its medial lateral features. The anterior part of the capsule is a broad, narrow, membranous layer, attached, above, to the anterior end of the lower extremity of the tibia; below, in the talus, in front of its highest point. The flexibility of the foot, as well as the change of minutes of the form in which it is placed on the floor or to hold an object in the ascent, etc., occurs mainly in the tarsal joints; a member enjoying a large amount of movement that is between the talus and calcaneus posteriorly and the navicular and cuboid anteriorly. An ankle injury occurs when the ankle is twisted from its normal position. Most ankle injuries occur during sports activities or while walking in an uneven position that forces the foot and ankle in an unnatural position. The unnatural shape of the ankle in high-heeled shoes or walking on unstable, loose clogs or sandals is also a factor that can contribute to ankle injury. They are classified as mild, moderate, or severe. Surgery is usually not a treatment option unless the damage is severe, involves more than lines, or when other treatment options fail.

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