THE PARENT’S GUIDE TO:

ANKLE INJURIES
AND ANKLE BRACING

Learn to Identify, Treat, and Prevent Ankle Injuries in Youth Athletes

By: Rick Peters, A.T.,C
THANK YOU!

Thank you for downloading The Parent’s Guide to Ankle Injuries and Ankle Bracing! It’s tough for parents to really know and understand youth sports injuries if they are not a medical professional. This guide helps to simplify those areas of concern when it comes to preventing sports injuries or what to do if you have an existing injury. Reading this guide can help give peace of mind that you’re doing the right thing when it comes to the welfare of your student athlete.

The information in this guide is shared for educational purposes only – please consult your physician or athletic trainer before making any decisions regarding injuries. If you have any questions about this guide or any comments to add, please feel free to email me at rpeters@ultraankle.com!

RICK PETERS, ATC

Rick Peters is a Certified Athletic Trainer who has been advancing ankle bracing technology for three decades. Peters patented his first ankle brace in 1985, revolutionizing the industry by adding a hinge to traditional stirrup braces for greater mobility.

In 1989 he was a founder and became President of Active Ankle Systems. In 1998 he co-founded Ultra Athlete LLC to develop the next generation of ankle bracing technology. Peters has 18 ankle brace patents and is considered an authority on ankle bracing technology worldwide.

Peters’ line of Ultra Ankle® braces are the most advanced available for prevention, chronic instability and acute injury care. Ultra Ankle® is ANKLE BRACING, EVOLVED®.
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In the U.S., an estimated 25,000 ankle injuries occur per day.

Ankle sprains are the most common sports related injury in the United States.

**Ankle Sprains are measured in 3 ways:**
- **Grade 1:** Ligament stretched
- **Grade 2:** Partially torn
- **Grade 3:** Completely torn

- **45%** of HS volleyball players will injure their ankle during the sports season.
- **70%** of varsity basketball players have suffered at least one ankle sprain.
- **85%** of youth soccer injuries are recorded as ankle sprains.

**Sports with the most ankle injuries:**
- Volleyball
- Football
- Basketball
- Soccer

**After spraining an ankle, you are 70% more likely to re-sprain your ankle.**

With each sprain, ankle ligaments stretch further and further causing the ankle joint to become loose and unstable.

**Prevent ankle injuries before they happen:**

**Ankle Taping**
Over the course of one sports season, taping an ankle will cost about **3x more** than wearing a preventative brace.

The use of an ankle brace reduces the risk of sustaining an ankle sprain by half compared with those who receive ankle taping.

**Lace-Up Braces**
Ankle bracing has evolved a lot since the lace-up brace was invented in 1887.

Lace-up braces restrict all ankle range of motion which causes them to lose support rapidly and wear out quickly.

Lacing Isn’t Bracing.

**Ultra Zoom® Brace**
The Ultra Zoom® ankle brace is the most evolved ankle brace on the market today that allows for full range of motion.

The hinged-cuff, low-profile design will not break or tear during regular use and will provide the ankle protection serious athletes need.
TYPES OF ANKLE INJURIES

In the U.S. an estimated 25,000 ankle injuries occur each day, so you are probably no stranger to having a sprained ankle or seeing someone else sprain their ankle.

Generally speaking, there are two types of ankle sprains that are diagnosed depending on where the injury took place – the low ankle sprain and the high ankle sprain.

**Low Ankle Injuries** – The classic ankle injury where the ankle rolls inward stretching the ligaments that connect the bones in the ankle joint. Medically this is called an inversion ankle sprain. 80% of all ankle injuries are inversion related. The alternative to an inversion sprain would be when the ankle rolls outward, again stretching the ligaments that connect the bones in the ankle joint in an eversion ankle sprain.

**High Ankle Injuries** – These occur when the foot/ankle externally rotate which stretches the tissue holding the two lower leg bones (tibia & fibula) together. This injury occurs above the ankle joint thus the name high ankle injury. An athlete with a high ankle injury will have more pain and a longer rehabilitation period when compared to a low ankle injury. Medically this injury is called a ‘syndesmotic’ ankle injury.
When your child sprains their ankle, a medical professional will measure the sprain’s grade according to its level of severity and provide a treatment plan according to which grade of sprain they suffered.

**Grade 1 Sprain (Mild)** – Involves the ligament(s) being stretched and is usually accompanied by some swelling and a little soreness. This is the mildest type of ankle injury. If you can walk on the ankle 24/48 hours after the injury with little to no pain you probably have a mild grade 1 sprain.

**Grade 2 Sprain (Moderate)** – Involves the ligament(s) partially tearing. With a grade 2 ankle injury you will typically have swelling and discoloration and you may also experience weight bearing pain. If after 24/48 hours the ankle is too painful for you to stand or walk, you may require crutches or a semi-rigid ankle brace designed to unload the ankle which reduces weight bearing pain.

**Grade 3 Sprain (Severe)** – This is the most severe type of sprain and involves a complete tear of the ligament(s). Swelling, discoloration, weight bearing pain, and some noticeable ankle instability are associated with this type of injury. If after 24/48 hours the ankle is too painful for you to stand or walk even with a semi-rigid ankle brace, you may require a walking boot to immobilize the ankle and reduce weight bearing pain.
With the amount of physical activity involved in most sports, it comes as no surprise that ankle injuries are the most common sports related injury across the wide spectrum of athletics. Some sports, however, have a higher incidence of ankle injury due to the objectives of the game being played and those sports are ones where it’s important to focus on ankle injury prevention from the beginning instead of after an injury has already occurred. Below are the most common sports ankle injuries in the sports where the majority of ankle issues occur:

**Volleyball**

Volleyball ankle injuries typically occur when a player from one side of the court lands with their foot below the net in the opposite court. Meanwhile an opposing player coming down from a jump/block landing on the first player’s foot, turning the ankle inward, and injuring the ankle. This is a classic inversion “low” ankle sprain and can be mild enough of an injury for a player to miss a few minutes of play or can be severe enough for them to miss the entire season.

**Basketball**

Basketball ankle injuries happen much like volleyball ankle injuries with one player coming down from a rebound and landing on another player’s foot, turning the ankle inward and injuring the ankle. The injury happens in a split second and the athlete has no time to adjust their balance and prevent the injury.
**FOOTBALL**

Football ankle injuries tend to be different with different positions. Ankle injuries to offensive and defensive lineman can occur when they are blocking an opposing player and someone falls on their leg/ankle – this can cause the foot/ankle to externally rotate causing a “high” ankle injury. High ankle injuries are much more severe than low ankle injuries and take longer to heal which is why it’s most common to see linemen in ankle braces more often than other positions. Wide receivers, running backs and defensive back can also suffer low ankle injuries from quickly cutting on an uneven football field, but these injuries aren’t as common.

**SOCCER**

Soccer ankle injuries typically occur during player to player contact when the athlete is running, cutting, sliding or tackling. Significantly more injuries involve a force from the outside or inside direction in comparison to the front or back direction. This type of ankle injury that occurs is the classic low ankle injury where the ankle rolls inward injuring the ligament/s that hold the ankle joint together. Medically this is called an inversion ankle injury.
DIAGNOSING AN ANKLE INJURY

INJURY EVALUATION
For the classic inversion ankle sprain the main site of pain and usually swelling is localized on the lateral/outside of the ankle. Several hours after the injury, increased swelling and pain can make the injury evaluation more difficult because the joint is starting to get stiff and sore. Discomfort and pain is usually evident when the athletic tries to walk. Discoloration of the skin can occur from 24 to 48 hours after the injury, starting on the lateral side of the ankle then spreading with gravity. If after 24 hours your pain is mild, you have little swelling, and can walk on your ankle with little or no pain it’s probably just a mild grade 1 ankle sprain.

If the athlete is experiencing excruciating pain, or exhibits one of the symptoms below it’s best to consult your physician immediately to evaluate the injury and prevent any further damage.

WHEN TO SEEK MEDICAL ATTENTION
• If anything looks abnormal when compared to the opposite leg and ankle.
• If your child hears a popping sound when the injury occurred this may indicate a torn ligament or fracture.
• If they can’t walk due to pain, or their ankle feels unstable when standing after 2-3 hours of resting after the injury.
• If the injury shows no improvement after 4-6 days.
ANKLE INJURY REHABILITATION

Please consult your physician or athletic trainer before attempting any rehabilitation exercises. Your child’s injury may be too severe to undertake these exercises and it is always best to err on the side of caution.

R.I.C.E.

RICE is the common method used by athletic trainers, coaches, and parents everywhere to quickly treat mild injuries. Follow the RICE protocol below to treat mild injuries if you’ve decided to not immediately see a medical professional.

Rest – Decrease your activity so your ankle has time to start healing.

Ice – You can apply ice to your injured ankle in the following ways:
  • Ice in a plastic bag (Apply to the ankle for 20-25 minutes)
  • Ice made in a paper cup (Apply to the ankle for 8-10 minutes and rip off the top of the paper cup as the ice melts)
  • Immersion in ice water (5-10 minutes)

You should ice your ankle many times a day with at least 30 minutes between each ice application.

Compression – Compression helps to reduce swelling, so tightly wrap an elastic bandage around the ankle and loosen the wrap if it becomes uncomfortable.

Elevation – Elevate the ankle above the level of your heart to reduce blood flow to the area and help alleviate increased swelling.
REHABILITATION

Before following this rehabilitation protocol you must consult with your physician. You or your child’s injury may be too severe to undertake the exercises outlined in this guide.

The following are non-weight-bearing movements in which you should ice before and after the exercises. You may start these exercises soon after an injury occurs although this may result in experiencing some soreness. If your child has more than mild discomfort, please discontinue the activity or reduce the intensity level until the pain lessens. The ankle should be exercised 3-4 times a day making sure to take lengthy breaks in between exercises.

**Range of Motion** – While you are sitting down, bring your toes up as far as possible then point them down as far as possible. Rotate your ankle inward as far as possible the outward as far as possible. Perform for one minute.

**Ankle Stretching** – Loop a towel around your foot and pull toward you. Hold that stretch for 15 seconds then release. Perform the stretch five times. Reduce the intensity if discomfort is noted.

**Towel Sweep** – Place a towel on a smooth floor. While sitting in a chair with your ankle placed over the towel, sweep your ankle inward, sliding the towel toward your opposite foot. Then sweep the towel in the opposite direction. You can add weight to the end of the towel to increase the intensity and strengthen your ankle. Perform for 1-2 minutes.
Weight Bearing Exercises – Ice before and after these exercises. Perform these exercises while standing (weight bearing) and without pain. Progress only if there is no pain. All exercises should be done on a flat surface – an indoor large room or hallway works best.

1. Walk in small steps
2. Walk in large steps
3. Walk in a “lazy S” pattern
4. End with icing the ankle

If you are an athlete progress to these more intense exercises. Wearing an ankle brace is recommended. Progress only if there is no pain. Ice before you start.

1. Jog straight ahead
2. Jog in a “lazy S” pattern
3. Jog in a “sharp Z” pattern
4. Sprint 10 yards
5. Start-stop slowly
6. Start-stop quickly
7. End with icing the ankle

Team Drills – When easing back into team drills as an athlete recovering from an ankle injury, it’s critical to test out the exercises slowly and gradually work your way through them using the following protocol:

1. 50% speed
2. 75% speed
3. 100% Speed
4. End with icing the ankle
Studies show that after spraining your ankle, an athlete is 70% more likely to re-sprain the same ankle. Since the ankle joint is supported by ligaments that can be stretched/torn during the sprain, once the ligament is injured it never fully recovers to its initial state. This causes the joint to become more loose and unstable with each sprain, making yet another ankle injury much easier to sustain.

Sports like volleyball, basketball, and soccer have a high incidence of ankle injuries. It’s extremely important for athletes that play these sports to be aware that 45-50% of athletes will suffer an ankle injury during the sports season.
STRETCH AND STRENGTHEN THE ANKLE

It will always help if your ankle and lower leg are strong and flexible. Although being strong and flexible won’t necessarily prevent an ankle injury, it will lessen the recovery time.

No matter how strong or flexible you are, ankle injuries happen in a split second. Although being strong, flexible and having good proprioception helps, the only real way to prevent ankle injuries is by wearing an ankle brace.

ANKLE BRACING

Ankle braces are designed not to prevent the ankle injury, although that does occur, but to lessen the severity should an injury occur. Wearing an ankle brace in sports where ankle injuries are prevalent should be as common as wearing a jersey or sneakers. However, choosing the right ankle brace to wear all season is the key.

The brace has to be comfortable to wear for long periods of time and it can’t negatively affect performance in any way. It has to be low-profile enough to fit in a tight-fitting athletic shoe, and durable enough to last all season, or multiple seasons. Next, we will detail the different ankle bracing options available.
INTRO TO ANKLE BRACING

It’s extremely important that a parent understand the different ankle brace designs that are available so that they can choose the best brace for their athlete. Just like any product you purchase, the latest and most advanced design, in most cases, is the best design. Some athletes, however, are still playing in century-old devices because they are simply unaware that more advanced technology exists. Check out the evolution of ankle bracing to see where your child’s ankle brace fits in the timeline and where ankle bracing is today as a technology:

HISTORY OF ANKLE BRACING

1887: Lace-ups or corset style supports were introduced over a century ago and still used today basically as an alternative to an ankle tape job. But like a tape job, lace-ups restrict normal up and down ankle motion causing them to lose support rapidly.
1981: Stirrup style braces are two plastic pieces connected at the bottom which lies under the foot. A stirrup brace is basically a splint that is primarily used in the early stage of an ankle injury. Today stirrup style ankle brace are rarely used in sports.

1983: Hinged ankle braces were developed to allow athletes to have full up and down range of motion of the ankle to improve comfort and performance. The hinged design was also a breakthrough in support. If the brace can move with the ankle joint, as a hinged brace can, then the straps stay securing in place maintaining long lasting ankle support.

2000: Hinged-cuff ankle braces were developed to protect the ankle from excessive twisting and turning to treat both high and low ankle injuries. Prior to the hinged-cuff design, ankle braces only protected the classic ankle injury caused by the ankle rolling inward, or low ankle injury.

2009: Before this advancement to a more flexible “soft shell” material, ankle braces were made either with fabric or a rigid plastic. Now, a soft shell ankle brace using just body heat can custom-fit to the ankle for a comfortable low profile athletic fit.

2013: Detachable shell technology was a big breakthrough in the treatment of severe ankle injuries. This technology provided maximum lower leg and stabilization during the acute phases of an ankle injury, then when the athlete was ready to progress to more mobility the upper cuff section can be detached for a low profile sport brace.
WHO SHOULD WEAR AN ANKLE BRACE?

Below is a general guideline for high school athletes as to who should wear an ankle brace. Please keep in mind every athlete is different and a consultation from a sports medicine professional would be preferred.

• Athletes that play sports with a high incidence of ankle injuries should wear an ankle brace to help prevent the ankle injury, or lessen the severity of the injury, should it occur.

• Volleyball, basketball, and soccer are examples of sports with high incidence of ankle injuries.

• Athletes with a previous ankle injury should wear an ankle brace because you are 70% more likely to injure your ankle again.

GOALS OF ANKLE BRACING

• Ankle braces are designed not necessary to prevent ankle injuries, although that does occur, but to lessen the severity should an injury happen.

• An ankle brace should not restrict normal ankle range of motion but should only restrict excessive ankle motion that causes injury.

• An ankle brace should be easy to apply by the user and be durable enough to last a full sports season.
TYPES OF ANKLE BRACES AVAILABLE

While there are a variety of ankle braces available through your doctor, sporting goods stores or online, the majority of the popular ankle braces used today can be segmented into one of the following types:

**Fabric Ankle Supports** – Typically a lace-up or wrap around style. These types of supports offer minimal ankle support and should not be considered by anyone who has a previous ankle injury.

**Plastic Braces** – These braces, which are typically hinged, can offer medium to maximum ankle support. However, with that extra support comes a bigger and bulkier ankle brace that can be somewhat uncomfortable. If choosing this style of ankle brace make sure you are satisfied with the comfort level of the brace.

**Soft-Shell Ankle Braces** – Designed to use body heat to custom-fit to the ankle. This forming to the ankle creates a very comfortable, low profile ankle brace. The soft shell ankle brace has a hinged-cuff design and is made of a thermoplastic resin that will never break, crack or tear. Soft shell ankle braces can offer medium to maximum support depending on the model.
HOW DO THEY COMPARE?

<table>
<thead>
<tr>
<th>Feature</th>
<th>Fabric</th>
<th>Plastic</th>
<th>Soft-Shell</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fits Either Ankle</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Easy Application</td>
<td></td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Full Range of Motion</td>
<td></td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Multi-Season Durability</td>
<td></td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Comfortable Custom-Fit</td>
<td></td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Restricts Ankle Performance</td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Long Lasting Ankle Support</td>
<td></td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Advanced Hinged Cuff Design</td>
<td></td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>History of Cracking/Tearing</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Helps Prevent High &amp; Low Ankle Injuries</td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reduces Ankle Strength</td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Replaceable Parts</td>
<td></td>
<td>✓</td>
<td>✓</td>
</tr>
</tbody>
</table>

COSTS OF ANKLE BRACING

**Fabric lace-ups** or wrap around ankle supports are the least expensive. Plan on paying anywhere from $30-$45 for this style of ankle support that will typically last up to one sports season, but may rip or begin to collect bacteria.

**Plastic ankle braces** that have a hinge can cost $35 to $60 depending on the brace design and product features. These braces have a history of cracking/breaking but usually come with a warranty for one playing season.

**Soft Shell ankle braces** cost **$47.95** and due to the high quality of the components used in the brace, typically experience multi-season durability.
As an athletic trainer with over thirty years experience in ankle bracing, I’ve answered thousands of questions over the years for athletes and their parents about ankle injuries and bracing. Here are some of my most popular questions and answers – if the information listed below isn’t helpful feel free to reach out to me via email or our website and I’d be happy to answer your specific question!

**WHAT AGE SHOULD MY CHILD START WEARING AN ANKLE BRACE?**

It’s less about age and more about the competition level. As the athlete gets older the competition gets fiercer. Typically you can tell when the athlete is starting to hit the ball harder, be more aggressive on the court, that is probably the time to start wearing ankle braces because the increased intensity can lead to ankle injuries.
DOES AN ANKLE BRACE WEAKEN THE ANKLE?

Clinical studies have shown that any brace that restricts normal non-injury range of motion could potentially weaken the muscles that surround the joint. Lace-up style ankle supports, used in this study, were found to restrict normal up and down ankle motion therefore reducing overall performance and strength.

HOW OFTEN SHOULD I REPLACE MY ANKLE BRACE?

Over time every ankle brace due to normal wear and tear loses its ability to support the joint the way it did when it was new. When a fabric lace-up style ankle support starts to rip or tear, that can negatively affect the level of support it provides so replacing it is recommended. With plastic hinged ankle braces over time the hinge can become loose and sloppy which will negatively affect its level of support. Once that hinge becomes loose, it’s time to replace it.

DO ANKLE BRACES REQUIRE A LARGER SHOE SIZE?

Most over the counter ankle braces do not require wearing a larger shoe size. However with some rigid plastic ankle braces you may encounter the need to wear a larger shoe size.

Effects of Lace-Up Ankle Bracing on Isokinetic Muscle Function and Joint Range of Motion

John E. Kovaleski PhD, ATC., University of South Alabama – Mobile, AL

CONTEXT
The primary purposes of ankle bracing is to maintain normal joint mechanics and permit normal muscular responses. Athletic tape and lace-up bracing have been shown to restrict sagittal plane motion and may not be appropriate for activities that require full dorsiflexion and plantar flexion range of motion. When sagittal plane motion is restricted, then the performance of a functional task could be negatively affected. No comprehensive analysis of the differences in muscle function and joint ROM between the ASO™ lace-up ankle brace and no brace has been reported.

OBJECTIVE
To examine the effects of the ASO™ lace-up brace support on ankle plantar flexion and dorsiflexion (PF-DF) isokinetic measures of muscle function and joint ROM.

PARTICIPANTS
Dominant ankle of 12 male athletes (21.5 ± 1.1 years, 82.9 ± 6.5 kg, 175.8 ± 7.8 cm).

INTERVENTIONS
Subjects were randomly assigned to two isokinetic testing sessions consisting of wearing an ASO™ lace-up ankle brace and no ankle brace while wearing their own low-top athletic shoe. PF-DF strength was assessed isokinetically at 30°/ sec, 120°/sec and 180°/sec. Following the strength tests, a maximal work performance test consisting of 15 PF-DF repetitions at 180°/sec was performed.

RESULTS
The results of this study indicate the ASO™ lace-up ankle brace significantly decreased ankle joint ROM and isokinetic measures of muscle torque, total work, and power (Tables 1 and 2).

CONCLUSIONS
Wearing the ASO™ lace-up ankle brace negatively affected ankle joint motion and muscle function by significantly decreasing plantar flexion-dorsiflexion ROM across the velocity spectrum and by significantly decreasing muscle torque, work, and power. Objective information on how lace-up bracing affects muscle performance and joint range of motion should assist the sports medicine professional when recommending ankle bracing to patients.

Table 1. Summary (Mean ± SD) of Statistically Significant Findings from Isokinetic Measures of Strength and ROM

<table>
<thead>
<tr>
<th>ANKLE JOINT RANGE OF MOTION (ROM)</th>
<th>NO BRACE</th>
<th>ASO BRACE</th>
<th>SIGNIFICANCE (P ≤ .05)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Plantar Flexion-Dorsiflexion at 30°/sec</td>
<td>57.53° ± 10.2°</td>
<td>44.54° ± 6.8°</td>
<td>P &lt; .001</td>
</tr>
<tr>
<td>Plantar Flexion-Dorsiflexion at 120°/sec</td>
<td>62.56° ± 9.2°</td>
<td>46.96° ± 8.4°</td>
<td>P &lt; .001</td>
</tr>
<tr>
<td>Plantar Flexion-Dorsiflexion at 180°/sec</td>
<td>61.97° ± 9.4°</td>
<td>46.98° ± 8.8°</td>
<td>P &lt; .001</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>MUSCLE TORQUE (FT-LBS)</th>
<th>NO BRACE</th>
<th>ASO BRACE</th>
<th>SIGNIFICANCE (P ≤ .05)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Plantar Flexion AVG PT 30°/sec</td>
<td>63.71 ± 11.7</td>
<td>55.68 ± 12.0</td>
<td>P = .05</td>
</tr>
<tr>
<td>Plantar Flexion PT/BW at 180°/sec</td>
<td>14.92 ± 4.7</td>
<td>13.13 ± 3.9</td>
<td>P = .04</td>
</tr>
</tbody>
</table>

Table 2. Summary (Mean ± SD) of Statistically Significant Findings from Isokinetic Work Test at 180°/sec

<table>
<thead>
<tr>
<th>TOTAL WORK – PLANTAR FLEXION</th>
<th>NO BRACE</th>
<th>ASO BRACE</th>
<th>SIGNIFICANCE (P ≤ .05)</th>
</tr>
</thead>
<tbody>
<tr>
<td>AVG Peak Torque - PF</td>
<td>23.17 ± 6.7 watts</td>
<td>18.34 ± 6.9 watts</td>
<td>P = .001</td>
</tr>
<tr>
<td>AVG Peak Torque - DF</td>
<td>8.60 ± 3.5 watts</td>
<td>7.00 ± 2.6 watts</td>
<td>P = .022</td>
</tr>
<tr>
<td>AVG Power - PF</td>
<td>47.42 ± 15.2 watts</td>
<td>33.81 ± 15.7 watts</td>
<td>P &lt; .001</td>
</tr>
<tr>
<td>AVG Power - DF</td>
<td>8.60 ± 3.5 watts</td>
<td>7.00 ± 2.6 watts</td>
<td>P = .022</td>
</tr>
</tbody>
</table>

Click Here to View This Study
IF MY CHILD HAS NEVER HAD AN ANKLE INJURY, WHY WEAR AN ANKLE BRACE?

It really depends on the sport whether or not a preventative ankle brace is a good idea. Sports like volleyball, basketball and others have a high incidence of ankle injury therefore if you play year round chances are eventually you are going to suffer an ankle injury. Wearing an ankle brace can either prevent the injury or lessen the severity should an injury occur. However it’s important that you wear a preventative ankle brace that is not going to restrict your ankle range of motion or strength.

WHAT’S THE DIFFERENCE BETWEEN AN ANKLE TAPE JOB AND AN ANKLE BRACE?

An ankle tape job is typically applied by a sports medicine professional such as an athletic trainer. It’s not very effective when an athlete tries to tape their own ankle. When comparing taping to bracing it really depends on the style of ankle brace. For instance if you were to compare a tape job to a lace-up ankle support the results would be pretty similar.

Both support mechanisms restrict normal ankle range of motion so they both loose support rapidly which is not ideal when you need ankle protection 30-45 minutes into a game. A lace-up ankle support is basically a reusable tape job.

Comparing an ankle tape job to a hinged or hinged-cuff ankle brace is a lot different. Where the taped ankle restricts normal ankle range of motion and therefore loses support rapidly, the hinged ankle brace moves with normal ankle range of motion keeping the straps securely in place maintaining long lasting ankle protection.

WHO CAN I ASK FOR MORE INFORMATION ABOUT ANKLE BRACING?

At any time you can ask the athletic trainers at Ultra Ankle your questions. At Ultra Ankle we totally focus on developing the most effective ankle bracing for sports. Our level of expertise will provide you with the necessary information to make wise decisions when it comes to ankle bracing and athletics.
When considering an ankle brace for your student athlete it’s important to get the facts about ankle bracing, which is why we developed this guide specifically for parents. We have experienced throughout our many years of attending sports tournaments and talking to parents the necessity to provide much needed ankle injury and ankle bracing information.

Those decisions parents make when their student athletes start having ankle injuries have a great effect on the longevity of their sports career, and potential college scholarship. So, be prepared and proactive to start preventing ankle injuries before they occur.

Should you have additional questions, our certified athletic trainers are available to answer your questions at support@ultraankle.com or 317-520-9902. Thank you for your interest in Ultra Ankle. Ankle Bracing, Evolved.

With advanced ankle brace designs utilizing the latest thermoplastic performance materials, Ultra Ankle® has developed three advanced ankle bracing technologies: Help prevent ankle injuries or treat mild/moderate ankle instability with the Ultra Zoom®, treat chronic ankle instability with the Ultra High-5®, and quickly treat and rehabilitate acute ankle injuries with the Ultra CTS®.