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DECEMBER 2015

Recognising and Managing Ankle Fractures

ALLIED HEALTH SERVICES AUSTRALIA

Ankle fractures are surprisingly common injuries, both in athletes and the general population. Being able to quickly identify the signs and symptoms of a fracture is extremely important in ensuring quick and effective medical management.

Ankle fractures come in different shapes and forms. For example, a netballer with shin splints may experience a stress fracture, while a soccer player colliding with another player may experience a large break of the bone at the base of the ankle. In either case, bony tissue has been disrupted and must be treated accordingly.

Knowing the signs and symptoms of fracture

Understandably, swelling and bruising will occur when a bony injury to the ankle takes place. Inability to bear weight on the affected leg, along with extreme pain when the affected area is touched are also very common signs of fracture. However, as an ankle sprain will often present with these same symptoms, it can be easy to misdiagnose an ankle fracture as a severe sprain.

Luckily, there are some established rules to follow if you suspect an ankle fracture. If one or more of the following signs are present, along with a history of trauma, it is recommended that you seek medical advice as soon as possible.

1) Inability to fully bear weight on the affected limb for 4 or more steps.

2) Tenderness to touch along the inner and outer bony aspects at the base of the ankle.

3) Pain to touch at the outer part of the foot.

Following diagnosis of a fracture, the doctor may decide to use a plaster (cast) to protect the bones while they heal. Severe fractures will need to be surgically stabilized. After surgery or time in a cast, ankles can be surprisingly weak and stiff due to disuse, leaving them vulnerable to becoming reinjured.

After removal of a cast, wearing a fabric brace is usually recommended for a few weeks. The brace provides an element of stability while the joint is regaining strength and balance.

During this time, it is important to start strengthening and mobilizing the ankle. A physiotherapist can develop a rehabilitation program that involves a gradual return to normal daily activities and eventually sport.

This rehab program will allow your bones to continue healing while adjusting to the increasing stresses being placed on them. You may begin rehab in a non-weight-bearing setting such as the pool, and progress to increased weight-bearing activities such as cycling.

Eventually you will be able to start a weight-bearing program on the grass or even on a hard surface to assist with your return to sport.

Word Find

G T D G D H H P X E
K R B E E E C W N C
C A E N T H S I W D
O N P E U C L O N G
M S B P N R A U L C
P V Q O I S O P F C
L E E A M P T W M D
E R H O M U L I N I
T S F O O X E G C R
E E C S C E C V Q K

CLOSED
COMMUNUTED
COMPLETE
COMPOUND
TRANSVERSE

GREENSTICK
HAIRLINE
IMPACTED
OPEN

Brain Teasers

1. Who always asks but never receives an answer?
2. What always runs but never walks, babbles but never talks, has a bed but never sleeps, has a mouth but never eats?

PhysioTip

If you find it difficult to make time for exercise, aim for little amounts, often. Incorporate exercise into your daily routine at home and at work. It does not take much to improve your physical health!

Osteitis Pubis

What is Osteitis Pubis?

Osteitis Pubis is a medical term used to describe sports-related groin pain. Osteitis means 'bone inflammation', while pubis refers to the specific bone that is affected: the pubic bone.

Osteitis pubis is usually an overuse injury that can sometimes be triggered by a specific event. It is characterized by pain deep within the front of the pubic bone, caused by inflammation. The area of the pubic bone affected is specifically known as the 'pubic symphysis'.

This type of injury is common in load-bearing athletes such as runners. Other people commonly affected include soccer players and footballers, due to their frequent kicking actions.

How does it happen?

Instability within the pelvic region is the primary cause of Osteitis Pubis, particularly if the instability occurs at the connection between the two sides of the pubic bones at the front of the body. The pelvis carries the weight of the upper body and is responsible for providing stability when walking, running and kicking. This means that the joint can easily become irritated and inflamed.

What are the signs and symptoms of Osteitis Pubis?

Osteitis pubis is aggravated by weight-bearing activities, with running and kicking being the two main culprits. Pain is usually experienced on one side, however both sides can be affected. The pain is usually located at the front of the pelvis, and may progress into the hip and groin area as it becomes more severe.

Sufferers of Osteitis Pubis tend to have a history of previous groin strain, as well as lower back pain. They may also have a history of a sports hernia in the hip area. As with most inflammatory conditions, the pain may be worse when in use, better when resting, and worse overnight into the morning.

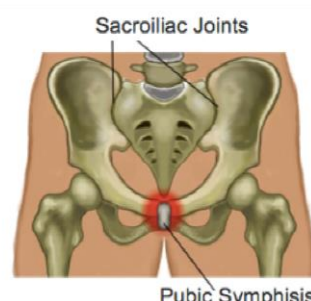
How can Physio help?

Your physio is able to help this condition in a number of ways and will hopefully get you back to your pre injury sporting level. During assessment, your physio will look at many different things to determine the cause of the condition. Muscle length, muscle strength and muscle control will all be assessed. Your posture in standing, walking and running will also be assessed to determine any irregularities.

Your physio will ask you to rest from sport for a period of time to allow some bony healing to occur. They will then progress you through a rehab program aimed at getting you back to sport.

This rehab program will retrain your muscles to stabilize the pelvis when walking, running and kicking. The muscles will also need to have relatively equal flexibility to help stabilize the pelvis. Your physio will give you specific exercises to target the strength and flexibility of these muscles. Finally, your physio will progress you to running or kicking, and allow you to gradually return to sport over a 3-to-6-month period of time.

The information in this newsletter is not a replacement for proper medical advice. Always see a medical professional for assessment of your individual condition.



Answers: 1) an owl 2) a river

Strawberry and Balsamic Bruschetta

Ingredients:

3 strawberries, thinly sliced

2 slices of Ciabatta bread

1 cup rocket salad leaves

Balsamic glaze



1. Toast slices of Ciabatta bread
2. Sauté strawberries for 20 seconds each side over medium heat
3. Top bread with fresh rocket
4. Place sautéed strawberry sliced over rocket
5. Drizzle with balsamic glaze

DietitianTip - Did You Know?

That peppermint relaxes the lower oesophageal sphincter, which can worsen GORD (heartburn) symptoms?

This includes peppermint gums, lollies and teas. Many people associated peppermint with settling the stomach, as it may be helpful in relieving flatulence or lower abdominal bloating in some people.

However, if heartburn or indigestion are an issue, it should be avoided!



**For Appointments
See your GP or
ask at Reception.
Medicare funding
is available.**

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