LCL injury

Description
Lateral collateral knee ligament sprain is a sprain (stretch or tear) of one of the four major ligaments of the knee. The lateral collateral ligament (LCL) is a structure that helps keep the normal relationship of the femur (thigh bone) and the tibia (leg bone) on the outer side of the knee. It prevents the knee from buckling outward. This ligament is the least injured major knee ligament. LCL sprains usually occur in association with other knee ligament injuries. When torn, this ligament may heal, but in a lengthened position (slightly loose).

Sprains are classified into three grades. In a first-degree sprain, the ligament is not lengthened but is painful. With a second-degree sprain, the ligament is stretched but still functions. With a third-degree sprain, the ligament is torn and does not function.

Common signs and symptoms
- Pain and tenderness on the outer side of the knee
- A “pop,” tearing, or pulling sensation at the time of injury
- Bruising (after 24 hours) at the site of injury
- Knee stiffness
- Limping, often walking with the knee bent

Causes
- Direct blow to the inner side of the knee. This usually occurs while the foot is planted on the ground and the knee is locked
- A blow to the outside of the knee causing it to collide with the injured knee. This forces the LCL to be stretched.

Risk of further injury
- Contact sports (football, rugby) and sports that require pivoting or cutting (changing direction), such as soccer or baseball
- Poor physical conditioning (strength and flexibility)
- Improper equipment use

Initial treatment
Treatment of a LCL injury initially consists of the use of anti-inflammatories and ice to relieve pain and reduce the swelling of the knee. Walking with crutches until you walk without a limp is often recommended (you may put full weight on the injured leg).
Your physician may recommend a knee brace with a hinge to help regain knee motion while protecting the LCL. Range-of-motion, stretching, and strengthening exercises may be performed at home, although referral to an athletic trainer or physical therapist is recommended.

Rehabilitation of LCL sprains concentrates on reducing knee swelling, regaining knee range of motion, regaining muscle control and strength, and a short period of bracing. For severe LCL sprains, those associated with other knee ligament injuries, or when bone is pulled off with the ligament from its attachment (avulsion fracture), surgery may be recommended.

**Pain control:**
Nonsteroidal anti-inflammatory medications such as aspirin and ibuprofen (do not take within 7 days before surgery), or other minor pain relievers, such as acetaminophen, are often recommended. Take these as directed by your physician. Contact your physician immediately if any bleeding, stomach upset, or signs of an allergic reaction occur.

Stronger pain relievers may be prescribed as necessary by your physician. Use only as directed.

**Swelling control:**
Cold is used to relieve pain and reduce inflammation for acute and chronic cases. Cold should be applied for 10 to 15 minutes every 2 to 3 hours for inflammation and pain and immediately after any activity that aggravates your symptoms. Use ice packs or an ice massage. Use ice for the first 72 hours after the initial injury.

**Knee exercises**

**Quadriceps sets**
- Tighten muscles on top of the thigh by pushing knees down into the table or surface.
- Hold for 5 seconds.
• Repeat this exercise about 15-20 times every hour.

![Image of straight leg raises]

**Straight leg raises**

• Tighten muscle on the front of the thigh, then lift your leg up about 8-10 inches off of the surface. Make sure that you keep your leg straight and knee locked.
• Hold for 5 seconds, then lower to the surface *slowly*, once your leg rests back on the table relax, then repeat.
• Do 3 sets of 15 for 2-3 sessions per day.
  • Make sure that you perform this exercise on both legs.
Heel Slides

- Lie on your back with injured leg extended on the wall.
- Concentrating on the heel of the painful knee, slowly slide the heel down as far as you can tolerate.
- Hold for 5 seconds.
- Slowly slide the heel back up to the starting position. Do 3 sets of 5-10 for 2-3 sessions per day.
Wall slides

- Leaning on wall, slowly flex your knees into a squatting position. **Do not go past the point were your thighs are parallel with the ground.**
- Hold the squatting position for 3 seconds then extend your knees sliding up the wall to the starting position.
- Do 3 sets of 10-15 for 2-3 sessions per day.
Please call **859-323-5533** with questions or for more information.