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Routine Use and Satisfaction of Measures for the Prevention of Ankle Sprain Injuries in Indoor Sports

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INTRODUCTION
• Ankle sprain injuries account for up to 30% of all sport-related injuries[1]
• 80-90% are of a lateral nature caused by a sudden excessive inversion of the foot[2]
• Ankle sprains are extremely common in indoor sports[1,3]
• Athletes with a previous ankle sprain are 4.9[3] to 8.2[4] times more likely to sustain another ankle sprain injury
• Current best practice prescribes a combined use of an external measure and neuromuscular training for 1-2 years[5]

OBJECTIVES
To identify the use of, and satisfaction with, measures for preventing ankle sprain injuries in indoor sports

METHODS
• 398 Players with a recent ankle sprain
  • Handball, Basketball and Badminton
  • Elite/sub-elite level (league, 1st, 2nd, and 3rd division)
• Questionnaire regarding use of and satisfaction with preventive measures
  • Sports tape
  • Kinesio tape
  • Rigid brace
  • Support bandage
  • Neuromuscular training
• Level of satisfaction rated using a Likert scale
  • Differences analyzed using a Mixed-design analysis of variance

RESULTS
• 90.7% of all players have used at least one preventive measure since their most recent ankle sprain
  • 77.6% have used sports tape
  • 14.3% have combined neuromuscular training with rigid bracing and/or sports tape
  • Rigid bracing was superior in adherence (56.1% continued use)
• Players were significantly more satisfied with:
  • Rigid bracing vs. any other preventive measure (P < 0.001)
  • Neuromuscular training vs. Kinesio tape (P < 0.001)
  • Neuromuscular training vs. support bandage (P < 0.001)
  • Sports tape vs. Kinesio tape (P = 0.003)
• 72.8% with a very recent ankle sprain (≤ 3 months) had stopped using preventive measures
  • “I did not feel the need anymore”

CONCLUSIONS
• Almost all players (90.7%) have used a measure to prevent ankle sprains
• Players were most satisfied with rigid braces
• Players do not follow current best practice

REFERENCES & ACKNOWLEDGEMENTS