



Anterior Impingement Syndrome

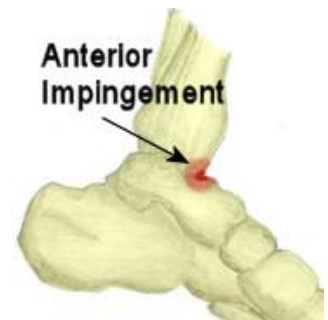
What is it?

Anterior Impingement Syndrome (AIS) is characterised by a build up of tissue (either bony or soft tissue) between two bones of the ankle joint; the Tibia and Talus. Due to this impingement, patients often present complaining of anterior (front of) ankle pain that is made worse with activities that require excessive movement of the ankle joint, e.g. Lunging, kicking and running. Anterior Impingement Syndrome is prevalent in all ages and gender, however, is most commonly seen in ballet dancers due to the amount of ankle movement that is required.

Why did I get it?

As mentioned above, Anterior Impingement Syndrome is the result of a build up of tissue within the front of the ankle joint. This can occur via;

- Repetitive flexion of the ankle joint e.g. Ballet en pointe'
- Direct trauma causing ankle to flex e.g. car crash
- Secondary to severe ankle sprain
- Systemic diseases (for example Rheumatoid Arthritis) that is associated with multiple bone spurs



Symptoms:

- Symptoms include pain felt at the front or side of the ankle.
- Often it may follow a sprained ankle which may have healed but impingement pain remains.
- Your ankle is weak.
- A giveaway sign of impingement is pain when forcing or passively moving the ankle into dorsiflexion (foot points upwards).

How is it diagnosed?

A thorough clinical examination and history will generally be sufficient for the diagnosis of Anterior Impingement Syndrome. You will more than likely be referred for an x-ray or Ultrasound to determine the exact cause of the impingement and to rule out further pathology.

Possible Treatments:

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|----------------------------|--------------------|
| ➤ Rest, Ice & compression | ➤ Footwear advice |
| ➤ Heel raise added to shoe | ➤ Mobilisation |
| ➤ Anti-inflammatories | ➤ Custom orthotics |
| ➤ Activity modification | ➤ Surgery |

Prognosis:

Mild cases of Anterior Impingement Syndrome generally respond to the above conservative treatment options. Surgery is rarely indicated and is reserved for severe cases and those that do not respond to prior care.