**MEDIAL COLLATERAL LIGAMENT (MCL) SPRAIN**

♦ **What is it?**

The medial collateral ligament (MCL) is the ligament on the inner side of the knee. This ligament runs from the inner side of the end of the femur to the inner side of the top of the tibia. The MCL prevents the knee from buckling inward. It is the most commonly injured ligament in sports. When torn, this ligament usually heals without any need for surgery.

An MCL injury usually occurs when the knee is sharply twisted or bent inward beyond its normal range of motion. The three grades of MCL injury range from mild to severe.

**Grade I** - Trauma to the ligament is relatively minor. Some of the fibers are stretched. This is considered a "sprain".

**Grade II** - Trauma to the ligament is more severe. Some of the fibers are torn. This is called a "partial tear".

**Grade III** - This is the most severe ACL injury. The fibers of the ligament are completely torn. It is referred to as a "complete tear".

♦ **Signs and Symptoms of this Condition**

- Pop or tear heard at the time of the injury (usually while cutting, jumping, or twisting).
- Inability to continue participating in the sport or activity in which injury occurred.
- Swelling and bruising (after 24 hours) at the site injury with the swelling and bruising often extending down the inner leg below the knee.
- Limping with knee kept bent slightly.
- Exquisite tenderness to press on the inner side of the knee over the attachments of the ligament to the femur and tibia.

♦ **Causes**

- MCL sprains are caused by force that exceeds the strength of the ligament. In a contact injury, this is usually the result of a direct blow to the outer side of the knee, usually while the foot is on the ground. In a non-contact injury, this can occur when landing from jumping such that the knee buckles inward or when cutting off a planted foot forcing the knee inward.

♦ **What Can I do to Prevent an MCL Tear?**
Warm-up before vigorous sporting activities
Maintain good hamstring and quadriceps strength
Use proper shoes for the surface (appropriate length of cleat for a given surface)
Perform sport-specific neuromuscular training (balancing on one leg with eyes closed or while tossing ball at wall, single leg hopping in different directions [like hop-scotch])
Certain functional braces may be helpful in preventing injury, especially re-injury, and in sports such as football in which linemen are often hit by opposing players on the outside of the knee causing an inward force on the knee.

♦ Prognosis

The MCL usually heals on its own with appropriate treatment. Rarely, isolated severe MCL injuries require surgery.

♦ Treatment

Initial Treatment
- **RICE** – Rest (crutches and staying off the extremity), Ice, Compression (with elastic bandage, and Elevation
- See your health care provider for an examination.
- Anti-inflammatory medication (aspirin, ibuprofen, etc) may be helpful in reducing both pain and inflammation.
- Rehabilitation involves eliminating the swelling, regaining full knee range of motion, regaining muscle strength, regaining neuromuscular control of the knee through proprioceptive training exercises (exercises involving balancing on the injured extremity while providing different challenges to balance).