Sprain of the Tibial (Medial) Collateral Ligament

**Brief Description:** A sprain is a joint injury that causes a stretch or tear in a ligament, a strong band of tissue connecting one bone to the other. The tibial (medial) collateral ligament is located on the inner side of the knee. It attaches the femur (bone of the thigh) to the tibia. The tibial collateral ligament is the prime stabilizer on the medial side of the knee joint and resists forces that force the knee medially.

Sprains vary in degrees (See first, second, and third degree sprain explanations in section on Inversion Sprains of the Ankle) from minor tears in a few fibers of a ligament to complete tears of entire ligaments. Complete tears make the joint very loose and unstable.

**Mechanism of Injury:** The majority of tibial collateral ligament sprain are resultant from trauma to the lateral (outside) aspect of the knee. This is termed a contracoup injury since the force placed on the outside of the knee causes damage (stretching) of a structure on the inside of the knee. Every ligament has a yield point, that point of stretch that causes damage (sprain) of the ligament.

**Symptoms and Signs:** The most common symptom following a medial collateral ligament injury is pain directly over the ligament. Swelling over the torn ligament may appear, and bruising and generalized joint swelling are common one to two days after the injury. In more severe injuries, patients may complain that the knee is unstable, or feel as though their knee may “give out.”

**Injury Management:** Immediate care of this injury requires PRICE — Protection, Rest, Ice, Compression and Elevation. Protection ranges from preventing the athlete from putting weight on the injured leg to immobilizing the knee and providing crutches non-weight bearing. Rest is accomplished by not using the injured leg. Ice prevents or reduces swelling of the knee as a result of the injury. Compression involves securely holding the ice bag in place for up to 20 minutes, then keeping the knee compressed using an ace wrap when the ice is not on the knee. Elevation means raising the leg so that the knee is elevated at least 12-15 inches above the hip to reduce circulation to the injured area.

It is a good rule to have every ligament injury seen by a physician to rule out serious injury that might require surgery to repair the ligament.

**Course of Healing:** The course of healing will depend on the degree of the sprain. A first degree sprain is relatively minor and will result in a minimal loss of time from activity. The key is to resolve the swelling and loss of function. An athlete should not be allowed to return to activity until he can run and change directions without limping or pain.