

Medial Collateral (Knee) Ligaments Sprains

The stability of a joint is increased by the presence of a joint capsule made up of connective tissue, thickened at points of stress to form ligaments.

The medial collateral Ligament (or MCL) is a broad, flat band situated on the inside of the knee. It is approximately 10 cm long and is attached to the femur at its proximal end and to the tibia at its distal insertion.

INJURY

Injury to the MCL usually occurs as a result of a valgus stress or pressure from the outside of the partially flexed knee forcing it to bend inward. Therefore stressing it beyond its capacity.

GRADES

Grade One: Local tenderness on the inside of the knee but usually no swelling

Grade Two: Acutely painful to touch and a small amount of swelling may be present

Grade Three: Patient often complains of instability or a “wobbly knee”. The amount of pain is variable and frequently not as severe as one would expect given the nature of the injury.

TREATMENT

Initial management of a ligament injury involves first aid treatment to minimise bleeding and swelling around the joint. If instability is present, then surgery or bracing may be required.

For grade I and II sprains, the principles of treatment involve promoting tissue healing, mobilisation to prevent stiffness, protection to avoid further damage and muscle strengthening to provide stability to the joint. Often the use of crutches in the earlier stages is advisable to unload the knee and ligament.

The treatment of a grade III sprain (complete tear) may be either surgical or conservative. The joint is then fully or partially immobilized to protect the repaired ligament, usually for a period of approximately six weeks.

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Medial Collateral Ligament Taping

EXERCISE	DETAILS
	<p>Position the knee between 5 and 15 degrees of flexion whilst standing</p> <p>Apply two anchors at top (A/B) and bottom (C/D) of technique in position with 5cm tape.</p>
	<p>Anchors are next applied (green). Their function is to firmly attach the Stirrups (red, first stirrup). Tape that is 38mm wide is the most popular for use throughout this technique.</p>
	<p>Apply two diagonal strips of 38mm strapping tape (red) from behind the thigh (on green anchor) passing anteriorly and inferiorly over the medial ligament. Finish the tape on the lateral aspect of the tubercle.</p>



Apply two diagonal strips of 38mm tape (blue) passing posteriorly and inferiorly over the medial ligament. Finish the tape over the calf region on the green anchor tape.



Apply two diagonal strips of tape (white) to further reinforce the diagonal strips that cross the medial ligament.



Further locking straps are applied (green) to secure crossing diagonals and vertical straps applied in steps 3, 4 and 5.



Elastic adhesive bandage Locking straps are applied using 5cm tape to hold procedure 3, 4 and 5 in place. The diagonal rigid tapes applied in 3 and 4 can be copied using 5cm elastic strapping tape to further reinforce the rigid tapes.