



## MCL Injuries

The medial collateral ligament (MCL) is located on the inside of your knee and functions in knee stability by connecting the femur (thigh bone) to the tibia (larger bone in your shin). MCL injuries occur most often when a direct blow is sustained to the outside of the knee. The forces produced by that contact will stretch the tissues on the inside of the knee.

The MCL in many cases, if it is a small partial tear, can heal itself and conservative treatment is recommended. Conservative treatment is done initially by controlling the pain and swelling. Use of crutches during this time is often helpful to keep the weight off of the involved leg, but is often symptom driven. Unless one is instructed otherwise, as in the case of a fracture or suspected fracture, use the crutches for comfort only. Some kind of a wrap or knee brace may also be used to stabilize the injured knee.

Ice is applied for 20 minutes on and 20 minutes off throughout most of the day for the first 2-3 days, make sure you keep a thin layer of clothing between you and the ice. After that time, it is OK to switch to heat. Soak the leg in warm water and allow the knee to bend and straighten. Do not do this if you are still unable to bear weight and there might be a fracture. During this time, the use of an anti-inflammatory medication is also helpful but not essential. Motrin (Ibuprofen and Advil are the same) in doses of 600 mg 3 times a day for about 5-7 days is the suggested dose. Those with aspirin allergy, severe asthma, and ulcers, bleeding disorders or those who take blood thinners (such as Coumadin or Plavix) should not take these medications. If these medications upset your stomach, discontinue use and ask your doctor for an alternative suggestion.

An MRI test may be ordered to further evaluate the extent of injury to the soft tissues which cannot be seen on x-rays. In some cases the MCL is completely torn in a way that it cannot heal on its own, surgery is then required to repair the ligament in order to regain stability. Surgical repair generally brings good results with the patient returning to full function after rehabilitation. Often physical therapy is helpful to restore motion, strength and balance.

A brace can be provided to supplement your stability in the short term to help you get around easier. Return to work, school and sports will be determined on an individual basis depending on severity of injury and type of activity.

### Highlights:

1. Injury is usually from a blow to the outside of the knee
2. Conservative treatment and rest generally decrease pain and return the patient to full activity
3. Surgery is most often NOT required unless the ligament is completely torn

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