



MCL knee injuries

What is it?

The MCL (Medial Collateral Ligament) is the major stabilizing ligament of the inner knee. It is usually injured when the knee is forced inwards or by a direct blow to the outside of the knee (creating a valgus stress).

Signs & Symptoms of MCL injuries:

Pain on the inner knee, often with a sense of instability of the knee. Sometimes, there's swelling in the knee joint and surrounding bruising. MCL injuries are *graded 1-3* depending on the severity of the tear. Sometimes, other ligament or meniscus injuries can coexist with MCL injuries.

Prognosis:

Most MCL injuries are treated non-operatively with very good results, regardless of severity. Time to return to sports varies, but severe Grade 3 injuries can take 4-6 weeks. An athlete shouldn't return to sport until they have regained pain-free motion, developed good muscle strength and good stability with sport specific exercises. Athletes should wear a hinged knee brace when returning to sports with Grade 2-3 injuries to protect their knee until they feel 100% stable.



Acute Treatment Tips:

- Rest, ice (15 minutes 4x/day), elevate
- Crutches w/ partial-weight bearing (initially) – until able to walk without a limp
- Compression bandage (ie: ACE wrap)
- Hinged knee brace –allow limited range of motion (initially)
- Physical Therapy – gradually increase range of motion & strength; stationary bike
- Surgery (rare) – usually reserved for multi-ligament injuries or chronically unstable MCL injuries

Chronic Treatment Tips:

- Orthobiologic injections, like Prolotherapy or Platelet Rich Plasma (PRP), may help improve pain with chronic Grade 1-2 injuries, but these injections are considered experimental
- Surgery – may be considered if a patient continues to have instability despite conservative treatment