

These Are the Sprains of Our Lives. . .

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This month's *Journal of Athletic Training* is a special thematic issue on ankle sprains and instability. Ankle sprains have long been recognized as the most common injury incurred by athletes and others engaged in physical activity. Less appreciated is the high proportion of individuals who incur ankle sprains and go on to develop chronic ankle instability and, in some cases, ankle osteoarthritis. In this publication, we aim to address these important clinical concerns.

This issue represents a sequel to a special issue on ankle instability that the *Journal of Athletic Training (JAT)* published in 2002 (volume 37, issue 4). At that time, we authored an editorial entitled "As the Ankle Turns. . ." ¹ Seventeen years on, we find that ankles continue to turn (primarily into inversion) as ankle sprains and instability remain a critical problem in the athletic training and sports medicine communities. We now recognize that, for many patients who sustain an initial ankle sprain, recurrent ankle sprains and bouts of instability will become lifelong concerns that will affect physical activity levels and health-related quality of life, hence the title of this editorial.

Keeping with the soap opera theme, patients with ankle sprains and the athletic trainers and other sports medicine professionals who care for them may ask, "Haven't I seen this story before?" The answer to that question may be summarized as an old story told through new perspectives. Although the topic of this thematic issue is not new, this publication includes a series of literature reviews, clinical commentaries, and original research articles that present the current state of the science of preventing, assessing, and treating patients with ankle sprains and instability. The

application of novel theoretical constructs, such as dynamic systems theory and the biopsychosocial model of health care, and contemporary measurement techniques from disciplines such as psychophysiology to the study of ankle sprains and instability has led to new ways of understanding these conditions and to advances in the clinical management of patients. These innovative perspectives are highlighted in this issue.

Many individuals must be acknowledged for making this publication a reality. First, our team of authors, many of whom are internationally recognized for their scholarly and clinical expertise, provided outstanding scholarship. Also, thanks to *JAT* Senior Associate Editor J. Ty Hopkins, PhD, ATC, FNATA, FACSM; Associate Editors Phillip A. Gribble, PhD, ATC, FNATA, and Patrick O. McKeon, PhD, ATC, CSCS; and Guest Editors Eamonn Delahunty, PhD, BSc, and Erik A. Wikstrom, PhD, ATC, FACSM, for their work and expertise in shepherding the articles in this issue to publication. Lastly, thanks to *JAT* Managing Editor Leslie Neistadt and Editor Kevin Clear for all their behind-the-scenes work that helped bring this issue to fruition.

We hope that readers will find these contents to be insightful and, more importantly, useful in evolving their clinical practice and improving the outcomes of their patients.

REFERENCE

1. Hertel J, Kaminski TW. As the ankle turns. . . [editorial]. *J Athl Train*. 2002;37(4):363.

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