

Welcome to the abridged audio version of CJ Hubbard's book, *Tape – Sprain – Treat – Repeat*, the story of how ankle sprains became the multi-billion dollar Ankle Sprain Industry they are today – Sponsored by Big Tape and delivered by a Sport near you.

I am Pip Grummet, former Operatic Singer and performer and I have known the Author for yonks. I have also benefited personally from the ankle system he has created, wearing it onstage in Vienna during a season of *Phantom*, so I am more than happy to help overcome his 'Mansplaining' dilemma, and introduce the book and associated Podcast, *KISS Ankle Sprains Goodbye*. You will find the full version including references and links to the Podcast at [www.kissankle.co](http://www.kissankle.co)

## Part 1 The Asset

Are ankle sprains just part of sport, because that's what we used to say about concussion and now we know better. Ankle sprains are the most common costly and painful joint injury on the planet and miles of tape from physiotherapy and their partner sponsors have somehow failed to prevent it. Number one of all Sports injuries and at well over one hundred billion dollars annually, the most prevalent and costly preventable joint injury on the planet. The problem is, the value of ankle sprains themselves has created what I call an 'Ankle Sprain Industry' and those within the industry and supported by Big Tape dollars, simply have no incentive or reason to question the practice of 'prevention' or management as it exists today. It is simply far too lucrative, and 'rolls on' without regulation, standards or consistent protocols that respect ankle sprains through post traumatic ankle osteoarthritis and a total ankle replacement, as cumulative trauma!

In 2016 the International Ankle Consortium published this.

*"Lateral ankle sprains are the most prevalent musculoskeletal injury in physically active populations. They also have a high prevalence in the general population and pose a substantial healthcare burden.*

*"...associated with decreased physical activity levels and quality of life and associates with increasing rates of post-traumatic ankle osteoarthritis, all of which generate financial costs that are larger than many have realised."*<sup>1</sup> Reference 1. Costs they estimate exceed 100 billion dollars annually.

People like you, me, our children and our favorite athletes are simply 'fodder' for the 'cash cow', where our rights to a safe work or sport environment have been sold to foreign medical company interests. They perpetuate what was once a stop gap solution in the first-place, ankle taping, existing virtually unchanged and the industry without innovation or evidence of repair for over 70 years. And the word 'Safety' is considered a dirty word and ankle PPE? Well, what's being used on you, your children or your favorite athletes isn't even considered PPE.

I struggle to imagine the human pain and often lifelong suffering sometimes beginning in childhood that 100 billion dollars plus represents, but like many of you I know that pain personally. However what pains me most is knowing ankle sprains can easily be prevented but those you trust to keep you safe at work or sport, or advise and treat your injury, have become so corrupted and conditioned by sponsors interests and dollars, you need to know what's going on; how to take control back for you and yours.

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<sup>1</sup> Evidence review for the 2016 International Ankle Consortium consensus statement on the prevalence, impact and long-term consequences of lateral ankle sprains

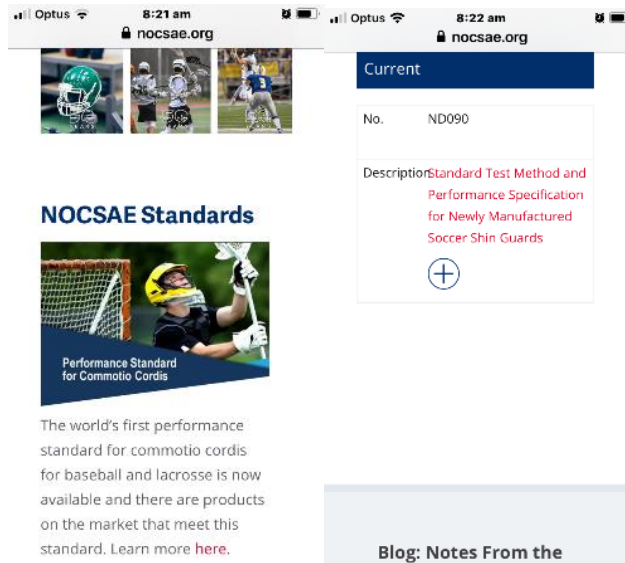


Why do you think we could put Man on the moon over 50 years ago and now nearly Mars, and not prevent the common ankle sprain? Is it really harder than space flight and rocket science, no.

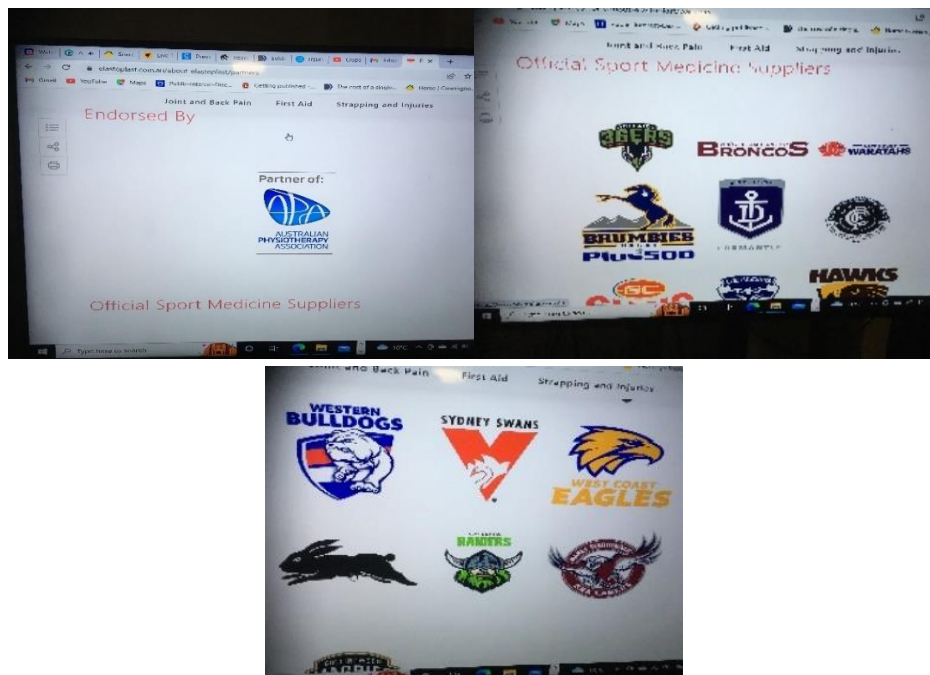
Why hasn't ankle taping evolved in over 70 years like every other form of sport safety, helmets, shoes etc.?



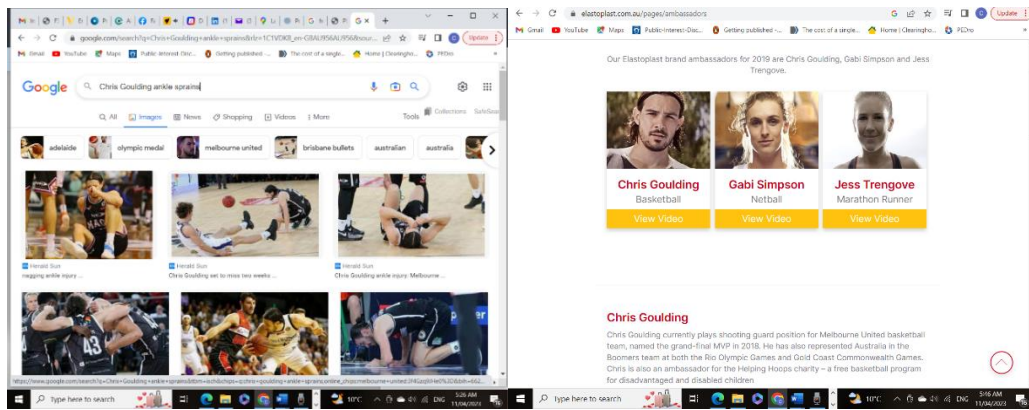
Why have there never been standards or mechanical testing developed like helmets and concussions, when concussion is far less prevalent and costly than ankle sprains will ever be? Even shin pads have Standards!



Ankle Tape and bracing is PPE and you wouldn't use a Helmet on your children that didn't have a 'standard' label? Or use a 'safety net' under a trapeze that was half full of holes? Does Ankle taping and bracing "prevent" injuries, 20%, 50%? Ankle PPE can be up to 100% effective for ankle sprain risk but how would you or anyone know when the system is motivated by profit not child and workplace safety? I wonder how much it costs to buy yours, your children, or your favorite athletes ankle injuries and that trust?



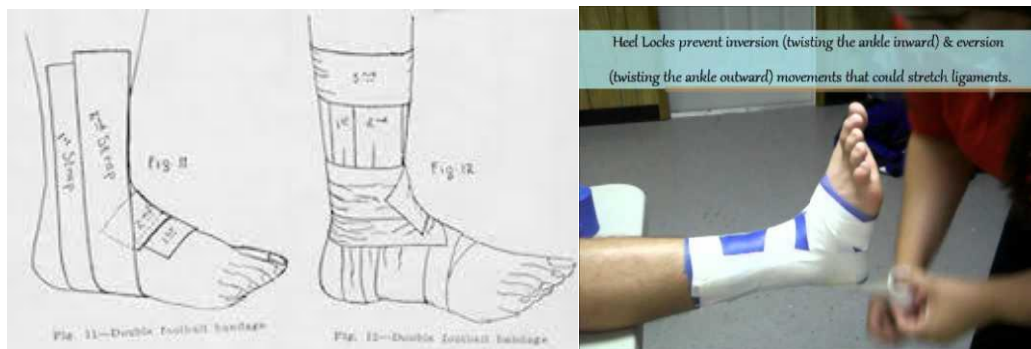
In the online version you will see examples of the relationships via sponsorship or official partnership between Australia's major sports leagues, the AIS, Australian Physiotherapy Association and Sports Medicine Australia and Big Tape. You may like to search NBL basketballer Chris Goulding and ankle sprains and then search Elastoplast Ambassadors. When you do you will see why I ask, "How much does it cost to buy your trust?"



Waste and cost are some of the main reasons ankle bracing has developed, and ironically, also why ankle braces are ineffective as PPE and have no Medical Intent for rehab; Ankle braces tried to copy ‘tape’ and in doing so continued to ‘bark up the wrong tree’. They chased a goal that was a flawed and baseless proposition in the first place, ankle taping. Probably a ‘stop-gap’ decision originally that became a lucrative proposition, then an industry, and then just too darn big and valuable to change.

Janice Radak, Editor of Lower Extremity Review Magazine 2023 writes *“should we really ask athletes—or anyone who is being physically active regularly—to use a 50-year-old solution that current evidence doesn’t truly support?”*<sup>2</sup> Reference 2

If you have a think about the far greater prevalence of ankle sprains, the potential negligence (at best) that caused it, and the value of athletes’ contracts today, the ‘harm cost’ of ‘concussion’, a cool billion dollars US to the NFL alone (so far), could well pale into insignificance in light of the potential trillion dollar compensation for preventable harm to ankles for ‘selling’ athletes rights to safe sport and work?



A list of the top 10 highest paid athletes in 2022 as published in the Greek Times shows a combined annual salary of over one billion Euros, and they all play sports with a higher-than-average risk of ankle sprains, football, soccer, basketball and tennis. Most, if not all of them have had publicly known ankle sprains, so considering these conclusions in the Journal of Athletic Training 2019 article on Osteoarthritis in retired NFL players, and the same prevention and rehab methods being employed across the board, it isn’t hard to see how the harm-cost could easily become enormous.

<sup>2</sup> What’s In A Name? That Which We Call Workout Shoes, By Any Other Name Could Be Personal Protection Equipment...Could It Not?

**TOP TEN HIGHEST PAID ATHLETES 2022**

1.	Lionel Messi	⚽	£108m
2.	Lebron James	🏀	£101m
3.	Cristiano Ronaldo	⚽	£96m
4.	Neymar	⚽	£79m
5.	Stephen Curry	🏀	£77m
6.	Kevin Durant	🏀	£77m
7.	Roger Federer	🎾	£75m
8.	Canelo Alvarez	🥊	£75m
9.	Tom Brady	🏈	£70m
10.	Giannis Antetokounmpo	🏀	£67m

Credit: Forbes

<https://greekcitytimes.com/2023/01/04/highest-paid-athletes-insane-2022-fortunes-revealed-include-giannis-antetokounmpo/>

***“Among former NFL players, a history of ankle injury increased the prevalence of osteoarthritis. More ankle injuries increased the probability that osteoarthritis negatively affected daily activities. Future prospective research is needed to better determine the influence of surgical intervention at the ankle or foot on osteoarthritis.”*** Reference 3.

Simply put, a failure to understand the injury and restore joint integrity, then unnecessarily restricting the essential function of ankle ‘roll’ are contributing to long-term harm and ligament laxity, and therefore chronic ankle problems such as Chronic Ankle Instability and Post-traumatic Ankle Osteoarthritis, feeding the ‘cash cow’ that is the global ankle sprain industry.

Since there is no protocol that considers Post-traumatic Ankle Osteoarthritis and cumulative trauma due to rupture of the tibiotalar synovial joint with ligament rupture, this needs to be considered initially and BEFORE returning someone to play. And what we are doing with tape and bracing that restricts ankle roll, creates stress on the injured ligaments, and the inability to maintain the even loading of the cartilage, predisposes you to Post-traumatic Ankle Osteoarthritis long term. IF athletes were sidelined for the correct amount of time to ensure and image repair, you might just find the team Owners, the Athletes and Fans demand the injury be prevented more effectively. Right now, ‘Ankle Sprains are just a part of Sport’, but I remember that concussion was also once just a part of sport, and the pressure to play and perform pushed the long-term consequences further down the track. Then litigation, science and the Media closed the gap. With the media focus on how well Anterior Cruciate Ligament or ACL injuries and concussions are being managed by ‘Sports Medicine’, avoiding a much larger problem, you have to ask, is the tail wagging the dog?

Bottom line is, unregulated and untested ankle taping and restrictive ill-conceived bracing has no place in a sports workplace as PPE, on injured ankles, and certainly not on children. Imagine if you walked into a State-of-the-art Professional Sports team HQ today and tried to tell them a roll of 2” or 50mm rigid ankle tape was to be used on their multi-million-dollar athletes as PPE? You could argue it is an Australian Therapeutic Goods Association registered Class 1 Medical Device?! Yes unbelievably, the TGA is the same mob that approved your Covid-19 Vaccines but Class 1 Medical Devices? Just a 575 dollar fee without

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<sup>3</sup> Osteoarthritis Prevalence in Retired National Football League Players With a History of Ankle Injuries and Surgery.

evaluation or evidence. Essentially it is an Industry Tax, not as you might think, reassurance of safety or medical benefit.

Ankle sprains, their prevention and rehabilitation, are not sponsorship opportunities, they are basic rights to safety, legal for sure in the professional sports workplace. This outdated practice can be 'unwound' simply by using the template created by the less costly and less prevalent example of Class action NFL lawsuits, concussion through to helmet and headgear testing, standards and management protocols for acute injuries. Acute management protocols that understand and consider ankle sprains and their long-term consequence as they should rightfully be: The greatest sports cumulative trauma injury that has ever existed. And let's not forget that's no accident.



There are 101 uses for Sports tape, just not on injured ankles or Children. #13 Inflight repairs

## Part 2 The Liability

What is the 'game'? The game is selling ankle taping by sponsoring elite sports, Physiotherapy, Sports Medicine, and Athletic Training, effectively 'buying' yours and professional athletes rights to a safe sporting environment or workplace. Physiotherapy has been elevated to a level of trust where the 'Safety Decision' regarding prevention, is all too willingly deferred to those with the most to gain from injury and tape sales themselves. Without any independent risk assessment and mitigation process, regulation or standard consistent with any other sports related safety or rehabilitation risk or equipment, those whose only motive is to profit from harm, even to children by imitation, operate with impunity.




Elastoplast Partner Australian Physiotherapy Association and is this an endorsement of 'tape' by the Federal Government by proxy courtesy of an undisclosed exclusive commercial relationship between the AIS and Big Tape?

← → ↻ elastoplast.com.au/strapping-and-injuries/sports-injuries/sprained-ankle-prevention

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### Elastoplast: How to strap the ankle with the AIS (Australian Institute of Sport)



Elastoplast

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At over \$100 billion a year, ankle sprains no doubt present a business opportunity if you are a physiotherapist or athletic trainer, and let me be clear, I'm not against physiotherapy in general, in fact I think, like you, they and the Leagues have all been had. Except it's only physiotherapy, athletic trainers and the leagues getting the sugar, the rest of us are just getting the pain, physically and financially, sometimes emotionally, sometimes lifelong. But hey we've always got our local physiotherapist to rely on. "I've got their number here; they sponsor my daughters netball club".



It's just Big Tape have, through sponsorship, financial incentive and restriction of exposure to alternatives, used you as they have the rest of us, for profit. It's almost inconceivable in its audacity, effective indoctrination and extent of harm, so what will lead to Safer Sport, improved rehabilitation and quality of life outcomes? And is compensation due for all that could have been prevented, through the largest single class action 'sports medicine' has ever seen? What happens next, I think that's probably still unclear, and a lot depends on what people do or did when they knew there was a problem, and most of you may be learning this for the first time now.

Who is responsible? Is it Big Tape or the Owners of professional teams, or the Leagues themselves? Perhaps the Physiotherapy and Athletic Training associations or the Trainers and Physios at the point of application if basic rights to a safe sport workplace was and is their responsibility? Is it an accident, like ankle sprains, that any of these organisations could have individually made sport safer on their own, but haven't, and they all share a financial arrangement? Maybe that is just a coincidence or an 'accident', like your daughter's ankle sprain, just waiting to happen because as discussed there are no rules, regulations, tests or standards to inform you or hold anyone to account, yet.

Big Tape know that their products are going to be used during rehabilitation on children and in the sports workplace as PPE. They know that this product and system has a significant failure rate and consequence as PPE yet have never evolved to make them safer. By comparison helmet manufacturers in American Football at least continued to try and get safer. So, did tape manufacturers neglect the end consumer in some way?



So, what did Big Tape do over the last 25-30 years? Well, it seems they've deferred responsibility for tape use to athletic trainers and physiotherapists. Now whether that's by empowering them through sponsorship, kudos and certification, effectively 'Conditioning' them, that's for others to decide. So let's look at the physios and athletic trainers.

Whether they like it or not, Athletic Trainers (in most cases in the USA) and Physiotherapists (in Australasia and Europe) are, in most sporting situations, making the Safety Decision on behalf of you, your children, the club, and possibly Big Tape. I was surprised that whilst ankle taping and bracing in a sports workplace is clearly workplace Personal Protective Equipment PPE, there was a lack of understanding, or even active resistance to that concept, Safety, on numerous occasions in the US. Introductions to NBA, Major League Baseball and Division One College team medical facilities were conditional on me not mentioning the word 'safety'. I had a private moment with one of the doctors at an NBA team while there and asked if he thought it was a safety issue to which he replied, "It is 100% about safety", having previously stated "25 % of NBA players will sprain their ankle and miss at least one game this season". It was obvious 'fear' of the word 'safety' in the pro locker-room was their 'Achilles Heel'.

Physios and athletic trainers know taping ankles has a significant failure rate but somehow, they become conditioned to accepting that, like 76ers Physio Scott Epsley "we have a system that works", and rarely if ever did they disclose that when you stretch or tear your ankle ligaments, nothing they do has ever been shown or proved under MRI to heal or repair it to preinjury state. Such that post traumatic ankle osteoarthritis is a potential given (workplace) outcome of this 'accident'. And they have accepted funding, kudos and certification from Big Tape, and many of them are paid to promote, advocate and demonstrate, 'conditioning' and 'indoctrinating' others into the practice of taping, so it is easy to see how you could become incredibly resistant to alternatives.

The National Athletic Trainer's or Sports Medicine Associations and Physiotherapy Associations who could be conducting independent reviews of safety and medical outcomes, simply don't. In many cases the best review you can get of a product is a paid endorsement. So, physiotherapy and athletic training have taken money from Big Tape, they haven't assessed and mitigated risk while they're in the safety decision making position (Safety isn't in any known professional Charter) and haven't disclosed the long-term harm. It is classic 'conditioning' to accept injury and not see or consider the consequence of their actions or they're just following 'orders', or protocols laid down by their Educators or employer in the workplace; isn't it the employer's responsibility to consider workplace health and safety? After all who is the 'Boss'?

So, I'm a team owner and I employ athletes, and I also employ athletic trainers and physiotherapists with a resume and portfolio of taping techniques and a degree in Athletic Training or Physiotherapy from a reputable university. And they are also full members and accredited by the national association, trusted bodies with an extensive history of protecting and rehabilitating ankle injuries; aren't they? We even have an income item 'sponsorship', money, where we get paid to use the product anyway so there's really no reason to consider an alternative because we already trust in and pay for the best products and advice. Or should we just have applied a consistent workplace health and safety risk assessment and mitigation process like any other workplace hazard instead of trusting the professionals? I'm thinking you probably should have done both, applied a consistent risk assessment process, and independent of your

employee's safety, consider whether a tape sponsor might still be possible for the 101 other uses for tape except as PPE or on Children's ankles.

The professional leagues, where most of our favorite teams and athletes work, make a living and take incredible risks during a very short 'work' window, which is a professional athlete working career, did what? The leagues have been taking sponsorship money from Big Tape for decades such that any team has a guaranteed income source from the leagues major sponsor. They failed to provide any consistent oversight of the impact of that sponsorship on workplace safety and defer responsibility to the individual teams, perhaps? What duty of care do the leagues have when they accept and recommend a sponsorship as part of their deal for their employees, not the athletes; the teams work for the leagues. In the end none of these organizations are benevolent, they're all in it for the money, using sport as the source of revenue.

So is it actually the responsibility of regulators of safety and sports equipment to have done something? Or like helmets and concussion, these things come from documented known harm and litigation, rather than an active understanding of the risks and safety of populations? There is a role for regulation, testing and standards, because like Big Tobacco where they knew the harm consequence long before it was uncovered, when Big Tape could have, and I suspect did recognize the problem in one way or another, they did nothing but potentially defer and delegate responsibility. It simply reiterates the fact that sport and ankle injuries are not about you and your long-term safety and health, it's all about the money. So yes, regulators could have 'seen' had they remembered the past and been actively looking, but with nobody waving a 'red flag' that anything was wrong?

### Part 3 The remedy

Considering what's to lose financially by preventing the common ankle sprain, you can see why nobody within the system really thought it was broken. Now there is a focus by 'allied health professionals' on concussion and ACL injuries, avoiding the most common and unsolved ankle sprain, a distraction Penn and Teller would find joy in. The bottom line for me is that physiotherapists and athletic trainers knew (or should have known) this was PPE and they couldn't rehab the ankle ligaments effectively, yet happily accepted the Safety Decision, Duty of Care and workplace safety responsibility and the money.

It is an effective model for sports and injury exploitation, it just ignores your rights to a safe workplace or PPE and lacks a consistent risk assessment and mitigation process like other risks or hazards. Unless we do something to demand and implement change, you and your kids and your favourite athletes will continue to pay for it all financially and physically, sometimes lifelong, and that, in my mind, is just wrong on so many levels. I would not be surprised to find others have developed safer and medically more beneficial products and methods too, but likely they have experienced the same unlevel playing field I have. Only independent Safety Tests, Standards and Medical Evidence of health benefit or repair will level this and make sport safer.

There are numerous other products regulated tested and standardised such as helmets and shin pads to use as examples. You and your advocacy are the only thing that will and can change that because now allied health and Professional Sports Leagues (who are all being paid by Big Tape) are 'happy' to exploit and perpetuate our ignorance for profit, because to them the 'Ankle Sprain Industry' is working according

to plan! And it will continue unless we do something about it, and concussion through helmet testing and regulation tells me we can!

Some of these tools can help change the game on social media platforms, or you can just make your own statement. Write a letter or start or sign a petition. Make a complaint or report about your concerns about safety or sport integrity. Or simply ask the questions: How safe is the method you are being offered or prescribed and how do you know? Or after injury ask to see the evidence of repair or restoration, especially if you are in a 'workplace'.

Join or start a Class Action Lawsuit is an option that has worked in similar situations. Whatever you can do, just do it 'safely' and when it seems tough, just remember the kids writhing around on the ground in pain and you may just find difficult choices become easier ones. Ultimately the 'safety decision' can be yours.

To read the full version go to [www.kissankle.co](http://www.kissankle.co), that's dot co not dot com. Here you can comment, read more articles and find the references, or tune into the Podcast **KiSS Ankle Sprains Goodbye** where we will unpack the book and debate and discuss various aspects of Ankle sprain prevention through to repair and regeneration. Or if you are passionate about any of the subject matter or have a question, why not reach out and have your say whether you agree or not? What have you got to lose?

1. **Evidence review for the 2016 International Ankle Consortium consensus statement on the prevalence, impact and long-term consequences of lateral ankle sprains**

<https://pubmed.ncbi.nlm.nih.gov/27259753/>

2. **What's In A Name? That Which We Call Workout Shoes, By Any Other Name Could Be Personal Protection Equipment...Could It Not?**

[https://lermagazine.com/editor\\_memo/whats-in-a-name-that-which-we-call-workout-shoes-by-any-other-name-could-be-personal-protection-equipmentcould-it-not](https://lermagazine.com/editor_memo/whats-in-a-name-that-which-we-call-workout-shoes-by-any-other-name-could-be-personal-protection-equipmentcould-it-not)

3. **Osteoarthritis Prevalence in Retired National Football League Players With a History of Ankle Injuries and Surgery.**

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6863693/?fbclid=IwAR2goSX8kzguXC2RhYi-PqQHl5kieqpYR1csjhFEm2O0iQHqkvK0Gphhkxl>

#### **Further reading**

**What If We Adopted PPE as a Mindset for Ankle Protection?** Lower Extremity Review. 2020;8:15-16.  
<https://lermagazine.com/issues/august/what-if-we-adopted-ppe-as-a-mindset-for-ankle-protection>

**Joint Pressure, Volume and Alignment in Development of AOA: Indications for Orthobiologics and Surgeons.** <https://maplepub.com/article/Joint-Pressure-Volume-and-Alignment-in-Development-of-AOA-Indications-for-Orthobiologics-and-Surgeons>

**Preventive interventions for lateral ankle sprains: A systematic review and meta-analysis.** Wang F, Guan Y, Bamber Z, et al. Clin Rehabil. 2023 May;37(5):585-602. doi: 10.1177/02692155221137640. Epub 2023 Jan 11. PMID: 36630892.

**2016 consensus statement of the International Ankle Consortium: prevalence, impact and long-term consequences of lateral ankle sprains** <https://pubmed.ncbi.nlm.nih.gov/27259750/>