

# Lateral Hip Pain (LHP)



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## What is lateral hip pain?

Lateral hip pain is pain around the outside of your hip joint that can sometimes refer down the outside of your hip.

## What is lateral hip pain?

Lateral hip pain (LHP) has traditionally been referred to as trochanteric bursitis. More recent evidence has demonstrated that bursitis is an inconsistent feature of lateral hip pain.

Usually LHP caused by overload to a group of muscles called your gluteal muscles, these are called gluteus med, glut max and glut min. They all attach from your pelvis and to the side of you hip bone which you can feel at your side. Their role is to stabilise your pelvis on functional tasks like walking and climbing stairs but also they allow you to move your hip. As we exercise or perform activities of daily living we stress and load our tendons around the body. Under normal conditions our tendon goes through a cycle of stress and regeneration on a daily basis to maintain normal health tendon tissue. However sometimes we overload our tendons or over compress our tendons which does not allow the tendon to regenerate and this is where the tendon becomes weak and painful. If you continue to overload or compress the tendon the muscle becomes stiffer, tighter and tender to touch often referring pain down the leg, due to pain you become less active. The muscle then becomes weaker and more simple activities become the overload activity thus they have become degenerative. The cycle then continues.

## Is it common?

Prevalence studies suggest that degenerative tears of the gluteus medius or minimus tendons occur in 20% of patients with osteoarthritis of the hip. Gluteus medius tendinopathy (GMT) also occurs in 20–35% of patients with low back pain. As the pain often refers down the lateral thigh, it is often misdiagnosed as lumbar pathology. This may lead to years of inappropriate and ineffective treatment. This is much more common in females than males, with a ratio of 3–4:1, peaking in the perimenopausal period. However, this condition may also occur in young athletes, particularly runners or those involved in step training.

## What are the symptoms?

You may feel pain and tenderness around the outside of your hip and thigh and/or around your buttocks. You may also experience pain...

- when standing, especially on one leg
- when sitting, especially if you are sitting with your legs crossed or feet tucked underneath you
- when walking, especially up hills or stairs
- at night, especially when lying on your side
- when getting in and out of a car or a bath.

**Top tip:** next time you stand up; check to see if your knees drift/kiss together. They should always stay in line with your hips and feet.

## Management of lateral hip pain

### What can I do to help the pain settle? (treat the causes)

Try to remove all compression from your hip by improving your posture. Here are some solutions to help you recover:

**Walking:** Try using a walking stick/ or walking poles and take regular breaks, try walking a little slower with less hills/slopes. Consider some cross training cycling

**Standing:** Make sure you're standing with your feet hip width apart and balance your weight equally on both sides. Use a stick or a worktop to support you or try perching on a stool. Carry a baby in front not on your hip.

**Sitting:** Avoid crossing your legs. Instead try keeping your hips, knees and feet aligned. Your knees need to be lower than your hips; you can get a wedge cushion to help with this. If your feet don't reach the floor, try using a foot stool so you aren't sitting on the edge of the seat.

**Sitting to standing:** Try not to let your knees drift together when standing or sitting down. Remember keep your hips, knees and feet aligned.

**Stairs:** Take your time and use the hand rail to help you up and down the stairs.

**Sleeping:** Lie on your non painful side and rest your top leg on a pillow alongside your body.

**Weight loss:** the heavier you are the more stress to your muscles the more overloading potential/ the more compression forces. Losing a few pounds take some stress off them.

## Treatment options - You might benefit from

### Ice treatment

Apply ice to the affected area for 5-10 minutes at a time three to five times per day to help reduce inflammation and irritation in the hip.

Make sure you wrap the ice in a thin towel to prevent an ice burn from occurring. You may need to ice the area every day for around 6-12 weeks.

### Exercises-

Sometime you will need simpler or more advanced exercises depending on your level of conditioning in which your physiotherapists can help guide you. Some considerations.

Stretches to try 2-3 times per day weeks 1-3

1. Knee to chest
2. Glut stretch
3. Hip flexor stretch

Strengthening introduction (week three onwards) build the reps and sets slowly miss alternate days if too sore the next day

1. The clam
2. Bridging
3. Hip abduction side lying

### Other considerations-

Pain relief – getting weak muscles strong and less stiff is usually not a painless process. Do consider simple analgesics such as Paracetamol, Ibuprofen (orally or gel rubs) Please speak to your GP or pharmacy for appropriate guidance on medication that is right for you.

Injections - these can be helpful in the short term but often unless the underlying causes are dealt with eg weakness/tightness/ overload/ postures then symptom are likely to reoccur.

### Prognosis / outlook

Using the information in this guide can help you to recover, but remember it's not always a quick process to get robust again. If your symptoms are mild and you have not been experiencing pain for very long, your recovery may only take a few weeks. If you have been experiencing pain for months or even longer, you are likely to see an improvement by following the advice in this leaflet but full recovery can take months.

