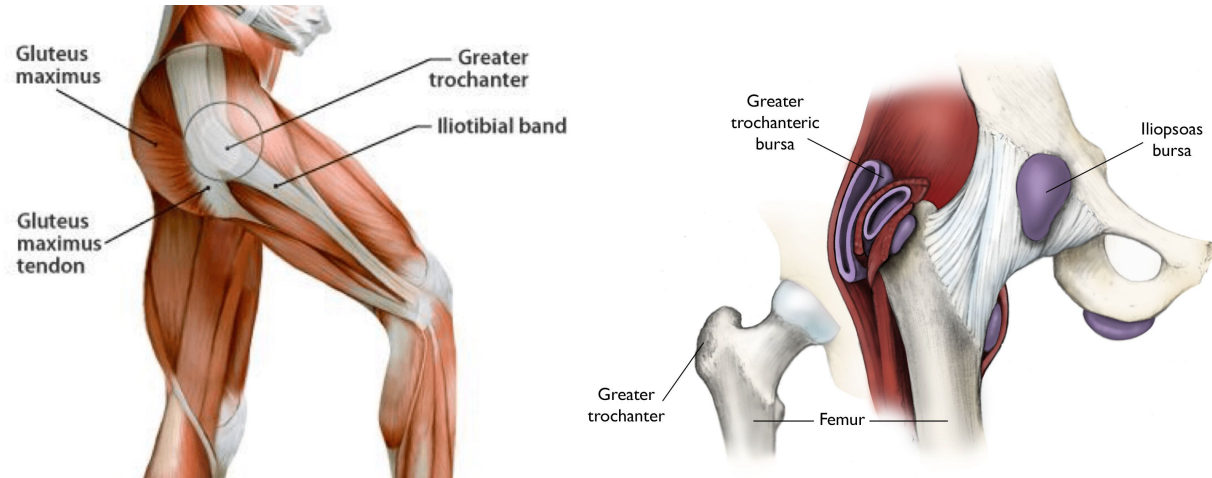


Understanding and Managing Trochanteric Bursitis

What is Trochanteric Bursitis?

Bursitis is the inflammation of the small, fluid-filled sacs that lubricate the motion between body parts. Trochanteric bursitis specifically refers to inflammation on the side of your hip.



While the pain is felt on the outside of the hip, it is usually a symptom of underlying mechanical issues rather than a standalone injury. The pain can sometimes radiate down the side of the thigh to, but not past the knee.

Why is this happening?

Think of your hip like a complex machine. When the parts are out of alignment, it creates friction. Your bursitis is likely caused by a combination of:

- **Tightness:** Your inner thigh muscles and your IT Band (the tight band running down the outside of your thigh) may be too tight, pulling on the hip structure.
 - **Weakness:** Weakness in your buttock (gluteal) and abdominal muscles can lead to mechanical imbalance. This is especially common in women over 50.
 - **Abnormal Mechanics:** Your hip may be moving in a way that puts unnecessary pressure on the bursa.
 - **As we age and become less active, our muscle strength decreases which decreases our tolerance for activity.**
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Lifestyle Modifications (The "Do's and Don'ts")

Small changes in how you sit, stand, and sleep can significantly reduce daily inflammation. Doing the same activities in a “bad” position over and over keeps the bursa irritated.

Sitting & Mobility:

- Adjust Your Chair: Avoid low, soft couches or deep recliner chairs. These put the hip in a position that aggravates the bursa.
- When sitting, try to keep your *knees* **lower** than your *groin*. This takes the pressure off the painful bursa.
 - *Tip:* You may need to sit on a firm pillow (or two) to achieve the correct height.
- Avoid Crossing Your Legs: This creates uneven pressure and increased tension on the bursa
- Driving/Bucket Seats: If you have a "bucket seat" in your car, try to elevate your buttock on a small pillow to prevent the sides of the seat from pressing against the bursa.

Sleeping:

- Mattress Support: Using a 2-inch memory foam topper on your mattress can provide the extra cushioning needed for a more comfortable night's sleep.
- Side-Lying: Avoid lying directly on the painful hip.
- When lying on your other side, place 1–2 firm pillows between your knees and ankles so the top leg does not sag across your midline (see the enclosed Exercise Handout).

Treatment & Recovery

To manage the pain and improve your mobility, we recommend a multi-modal approach:

It is critical that you understand some facts about this problem:

- 52% of patients improve spontaneously with NO treatment within 1 year, but only 29% are better at 8 weeks without treatment.
- Education (like this sheet) AND Exercise will improve 77% of patients at 8 weeks and that result is 78% at 1 year
- Injections only help 58% of people at 8 weeks and only 57% at 1 year and can actually harm tissue (the gluteal tendons)

1. Targeted Stretching

It is essential to lengthen the inner thigh muscles and the IT band.

- The best way to stretch the IT band is with a foam roller: lie on your side with the roller under the outside of your thigh and slowly roll between the hip and the knee. Do not roll over the bony points at the hip or knee.
- To stretch the inner thigh (adductor) muscles, sit with the soles of your feet together and gently push your thighs apart with your hands or elbows. Hold 30 seconds and repeat 3 times. You can also do this sitting in a chair with your knees apart.

2. Temperature Therapy

- Icing: Frequent icing of the area can help numb the pain and reduce active inflammation.

3. Medication

- Voltaren Gel: This over-the-counter topical gel can be applied up to 4 times a day to manage localized pain.
- Drugs like Advil (3 pills 3 times/day) or Aleve (2 pills 2 times/day) can be beneficial when used for short periods of time (2 weeks). Take them with food. Do not use if you have kidney, liver, heart disease, or a history of stomach ulcers.

4. Footwear Adjustments

- If you notice pain specifically on your "long leg," a heel lift in the opposite shoe to even out your leg lengths is helpful for some patients.

5. Formal Physical Therapy

- Therapists can teach you how to properly do your exercises in a way that is less painful for you. You can call (952) 993-5900 to make a PT appointment. Your doctor can place an order for therapy in your chart.

6. Home Exercise Program

- Strengthening the hip (gluteal) muscles is the most important part of treatment. Follow the enclosed Exercise & Load Management Handout and the Video Exercise Directory (scan the QR codes with your phone).
- Important: Do NOT stretch by pulling your knee across your body toward the opposite shoulder, and avoid lying on the painful side. Both press the irritated gluteal tendons against the bone. Foam rolling the outer thigh and the inner-thigh stretch above are fine.
- This condition is also called gluteal tendinopathy or greater trochanteric pain syndrome; the enclosed handouts use those names.