



Advice and exercise to manage hip pain

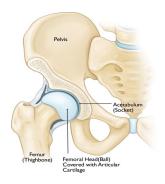


Cambridgeshire Community Services NHS Trust: delivering excellence in musculo-skeletal services and pelvic health physiotherapy across Cambridgeshire and Peterborough This guidance has been produced by the DynamicHealth physiotherapy service. It offers simple measures to help you manage your hip problem safely; often the right advice and exercises are all you need to improve the problem. This leaflet has been made available to your GP, who may ask you to try the advice and exercises prior to consulting a physiotherapist.

If your hip pain started suddenly after a recent significant injury e.g. slip, trip or fall and you are unable to weight-bear, or if you have a hot, swollen hip with a high temperature and fever, please seek urgent medical advice such as A&E, minor injuries or 111 before reading further.

About the Hip

The hip is a ball and socket joint that allows movement and provides the stability needed to bear weight, relying heavily on the necessary strength of the surrounding muscles. The socket sits within the pelvic bone and the 'ball' is at the top of the thigh.



Common causes of hip pain

The hip is one of the joints most commonly affected by Osteoarthritis, particularly if you are over the age of 50.

Osteoarthritis is a condition that affects the joints and can cause pain and stiffness. Our joints go through a normal cycle of wear and repair during our lifetime. During the repair phase, the joints may change in structure and shape, cause thinning of the cartilage between the joint surfaces (For more information, Versus Arthritis is a useful source: *https://www.versusarthritis.org/media/22728/*) *osteoarthritis-of-the-hip-information-booklet.pdf*

Pain from the hip joint is typically felt in the groin and sometimes can be felt from the top of the thigh to the knee and occasionally all the way down to the ankle. It might feel worse with specific movements like prolonged standing, walking, twisting and bending. The lumbar spine (low back) can also refer pain into these areas and therefore if symptoms are worsening despite the advice and exercises given below, further assessment by a health care professional is recommended.

Pain on the outside bony part of your thigh could indicate a soft tissue problem and is commonly termed **Greater Trochanteric Pain Syndrome (GTPS).**

GTPS describes pain at the side of the hip, often felt on side-lying or when climbing stairs, which originates in the soft-tissues of the hip including muscles, tendons and bursa. In the majority of cases, pain is usually a consequence of overloading the gluteus medius and/or gluteus minimus muscles and/or compression of their tendons in certain postures and can occasionally be accompanied by an inflamed bursa. Tendons can be overloaded either with a significant change in physical activity (type or volume) or most commonly with a loss of strength in these muscles.

Whatever the cause, exercise and following our simple tips can help reduce the symptoms.

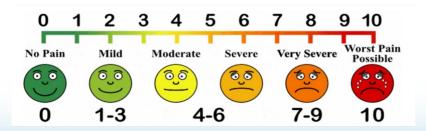
Hip Exercises

How much should I do?

- **Exercise every other day** allowing enough rest is important to let the soft tissues recover and develop.
- **Choose 3 or 4 exercises** from the set below that are challenging but manageable.
- **Perform 5 –10 repetitions** of each exercise, 3 5 times a day.
- **Rest for up to 1–2 minutes** between each set.
- Once an exercise is easy, progress it by increasing the number of repetitions (you could aim to increase it by 2 5 repetitions every 2 weeks) or by holding the positions for longer, or moving to a more challenging exercise.

How much pain is too much?

- **Before exercising, rate your pain** at that moment on a scale of 0–10, where 0 is no pain and 10 is the worst pain you can imagine.
- A maximum pain level of 4/10 while exercising is fine, as long as this eases within 45 minutes of the session and does not interfere with sleep or activities the next day.
- If your pain increases beyond this, simplify the exercise by reducing the range of movement or number of repetitions, or try an easier exercise.



Osteoarthritis Exercises



Knee to chest Stretch

Lying with your knees bent and your feet on the floor.

Lift one knee towards your chest. Place your hands behind the knee and draw it into your chest. Hold secs.





Lying with your knees bent and feet on the floor hip width apart.



Turn the soles of your feet to face each other and allow your knees to fall outwards. Feel the stretch in your groin. Keep your back flat on the floor during the exercise.

Standing Hip Abduction

Stand up tall with your back against a wall and hold onto a support as you need to. Lift your leg sideways, keeping your leg against the wall and leading the movement with your heel. Then back to the start position. Keep your upper body straight throughout the exercise.



Hip Extension in Standing

Stand tall holding onto a chair.

Squeeze your buttocks and bring one leg back, keeping your knee straight.



Sit to Stand

Choose a good steady chair such as a dining room chair for this exercise. Sit on the chair with your feet and knees hip width apart and feet flat on the floor. Aim to keep your knees and feet pointing forwards. Stand up purposefully pushing through your heels, straightening your knees and tucking your hips underneath you to stand up tall. Sit back down in a steady and controlled manner, leading with your hips as you simultaneously bend your knees and hips. Throughout the exercise try to keep looking forwards, it can be helpful to pick something to focus on.



Bridge

Lie on your back with legs bent.

Squeeze your buttock muscles and roll your pelvis off the floor. In a controlled manner, return to the starting position.



Mini-Squat with Support

Stand and take support if needed.

Squat down and at the same time move your pelvis slightly backwards. Straighten your hips and return to the starting position



Heel Raise

Stand tall, with your weight distributed evenly on both feet, and take support if needed.

Rise up onto your toes and in a controlled manner return to the starting position.

Exercises for GTPS



Standing Hip Abduction

Stand up tall with your back against a wall and hold onto a support as you need to.

Lift your leg sideways, keeping your leg against the wall and leading the movement with your heel.

Then back to the start position.

Keep your upper body straight throughout the exercise



Resisted Hip External Rotation and Abduction in Sitting

Start by sitting on a bench with feet flat on the floor and a mini band around your legs, close to your knees.

Keep your feet in place and move your knees outwards against the resistance. Feel the tension in your buttocks. Slightly holding back the movement, bring the knees to the starting position.



Chair Squat with Hip External Rotation

The loop of exercise band is placed around your legs under your knees and the slack is taken off. Make sure the chair is at a suitable distance behind you.

Bend your knees and hips and squat down. At the same time rotate your knees outwards against the resistance. The knees and toes should point in the same direction.

Lightly sit down and then push back up to the starting position using your front thighs and buttock muscles.



Bridge with Hip External Rotation

Lie on your back with knees bent and an exercise band loop placed around your thighs near your knees.

Rotate your knees slightly outwards against the resistance. Squeeze your buttocks and roll the pelvis off the floor. Keep your knees apart.

In a controlled manner, return to the starting position.

Positions to avoid



Postural Advice Avoid standing in this posture; stand with knees straight, with weight equally distributed across both feet.



Postural Advice - Avoid sitting in this position; sit with knees bent, both feet placed on the floor with weight equally distributed across both feet.



Avoid Stretches -Do not perform this or similar hip stretches until your symptoms have fully resolved.



Sleeping Position -Avoid sleeping in this position. If you prefer to sleep on your side, lie on your symptom-free hip, bend both knees and place a pillow between your knees.



Recommended sleeping position.

Top tips

- Try and build your exercises into your everyday activities.
- You don't have to do all the exercises in one go.
- Don't feel you have to replicate the full movement of the exercise straight away. Use it as an initial guide.
- If one particular movement is painful, use this each week to evaluate your progress.
- It is normal for it to take 6-12 weeks before you see a good improvement in your pain, movement and strength.
- If your sleep is poor, try supporting your knees on a pillow if on your back and between the knees if you're lying on your side.
- General exercise can really help your recovery so try to keep going with other activities you enjoy, to keep fit.
- Wear sensible, well-fitted shoes e.g. trainers.

Lifestyle and Wellbeing Support Services

https://haycambspboro.co.uk/

https://healthyyou.org.uk/

Speaking to the social prescriber at your GP practice can also be a very useful resource.

Useful Information Sources

- Please look at: <u>https://www.nhs.uk/live-well/exercise/walking-for-health/</u>
- You could also try using the free Active 10 App on your smartphone.
- A great resource is the website 'Healthy You' which provides you with access to your local weight management scheme <u>https://</u> <u>healthyyou.org.uk/</u>
- Arthritis research UK: https://www.versusarthritis.org/media/22728/ osteoarthritis-of-the-hip-information-booklet.pdf

For further information about this service contact:

General Enquiries: 0300 555 0123

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