

TROCHANTERIC BURSTITIS

Trochanteric bursitis or hip bursitis is a condition most often found in middle aged or elderly women rather than in men or younger people. It is however, not uncommon in athletes and football or soccer players where extended periods of running are required.

Bursae are found throughout the body, particularly in the shoulder, knee, ankle and hip joints. They are small sacs of fluid, which cushion and lubricate the areas between the bones, muscles and tendons of the joints. When these bursae or sacs become irritated or inflamed, bursitis is the result. Inflammation of the trochanteric bursa is a common cause of hip pain.

THE ANATOMY OF THE HIP

The thigh bone (or femur) is the longest and strongest bone in the body. At its top end it meets with the hip bone as a ball and socket joint. This joint allows for flexibility and a great range of motion in the hips.

The greater trochanter is found at the end of the femur and can be identified as the outside or lateral protrusion of the hip joint. This marks the attachment site for a number of significant muscles controlling movement in the thigh and pelvis.

The trochanteric bursa is a large sac separating the greater trochanter of the hip and the muscles and tendons of the thighs and buttocks.

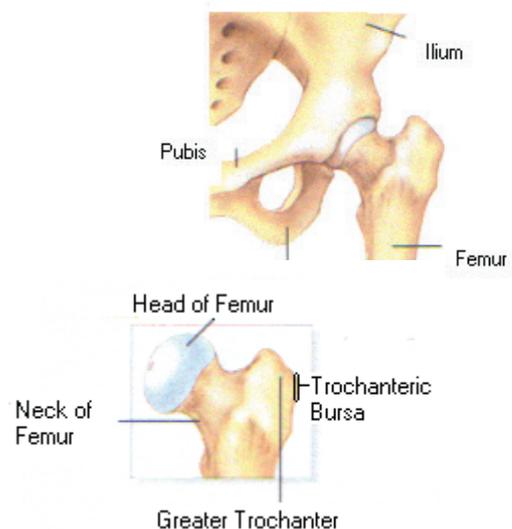
CAUSES

CAUSES OF TROCHANTERIC BURSTITIS INCLUDE:

- Overuse of the joint (repetitive stress)
- A direct fall onto the hip
- Prolonged pressure on the hips from standing for long periods
- Prolonged lying on one side of the body
- Prosthetic hip implants or hip surgery.

SIGNS AND SYMPTOMS

- Pain is the main symptom of trochanteric bursitis
- The pain will be felt whenever the joint is used and usually extends over the outside or lateral aspect of the hip and often may radiate down to the knee
- The pain is typically described as a burning and tingling along the outside of the thigh
- This may also be accompanied by a burning sensation in the skin
- Lying down or rolling onto the affected side increases the level of pain
- People with trochanteric bursitis will experience pain when sitting, standing for long periods of time and when climbing stairs



- Those affected often will have disturbed sleep patterns due to pain experienced at night
- Limping
- Swelling from increased fluid within the bursa

DIAGNOSIS OF TROCHANTERIC BURSTITIS

If trochanteric bursitis is suspected, your Doctor will conduct a physical examination of your hip joints.

A medical history will also be taken to highlight any significant injury or past surgery to the hip joints.

If required, your Doctor will arrange for a x-ray or ultrasound of your hip. These help in the diagnosis by revealing any bony spurs, calcium deposits or other problems which may be contributing to the bursitis.

Very occasionally a MRI scan (Magnetic Resonance Imaging) may be needed.

TREATMENT

Following the examination and the results of any x-rays or scans, your Doctor will discuss with you the most likely cause of your bursitis.

Rest is commonly prescribed to assist in reducing the inflammation of the bursa. This will also mean identifying the actions or activities which cause you discomfort and making changes where necessary.

Weight loss is encouraged if it is a significant contributing factor to the bursitis.

Conservative treatments such as ultrasound, acupuncture and massage therapy have been found to be of benefit.

Icing the affected area for 15 minutes up to three times per day can also be beneficial. Wrap the ice in a tea towel before using and never apply ice directly to the skin.

Once the symptoms are controlled a physiotherapist can help with planning some hip and back strengthening/stretching exercises for you. Pelvic tilt exercises may also be recommended.

Your Doctor will discuss pain relief with you. If tolerated, non-steroidal anti-inflammatory medications may be prescribed.

If conservative steps do not bring relief then your Doctor may arrange a corticosteroid/ local anaesthetic injection into the affected area. This injection can be repeated a few months later.

Surgery is considered a last resort in the treatment of trochanteric bursitis.

RETURNING TO SPORT

You will need to discuss returning to sport with your Doctor. While you are recovering from your injury you may need to change your sport or activity to one that does not make your condition worse.

For example, rather than run or ride your bike you may need to swim, as this will reduce the stress on the hip joints and surrounding muscles.

The goal for rehabilitation is to return you to your sport or activity as soon as is safely possible. Returning to an activity too soon may worsen your injury.

Remember that everyone recovers from an injury at a different rate. Returning to your chosen activity, where appropriate, has more to do with how soon your hip recovers than with how many weeks it has been since your injury.

In general terms, the longer you had symptoms before seeking treatment the longer the recovery time.

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