

HIP PAIN

Patients will complain of hip/groin symptoms

Differential diagnosis

Neural entrapment/referred pain from lumbar spine/lumbar radiculopathy
Clinical presentation:

- Pain in leg with or **without** low back pain.
- Patients can present with parasthesia/anaesthesia lateral thigh/leg pain.
- Restricted SLR/PKB

If patient complains of above refer to spinal pathway

Exclusions

Inguinal hernia

Hip Conditions (Excluding hip OA)

Trochanteric Bursitis

Clinical Presentation

- Typically sporty patient or middle aged overweight female
- Lateral hip pain, may radiate to lateral or postero lateral aspect of thigh if severe
- Pain on direct palpation of the bursa
- Inability to sleep on affected side
- Pain brought on by hip movement, eg walking/climbing stairs

Investigations

- X-Ray not indicated
- MRI not indicated

Management

- Conservative management
 - Analgesia
 - NSAIDs
 - Rest from sport/activity that aggravates symptoms
- Injections, consider a single injection into the bursa if no improvement with conservative management
- Referral to Community MSK service if no improvement following six weeks conservative management or prior to this should injection therapy not be available at GP practice.

Clicking snapping hip

Clinical Presentaion

- TFL snapping over greater trochanter or could be iliopsoas, usually brought on by active hip flexion or rotation
- May complain of pain in conjunction with the snapping

Investigations

- X-Ray not indicated
- MRI not indicated

Management

- Conservative management
 - Analgesia
 - NSAIDs
 - Rest from sport
 - Reassurance re benign nature of condition
- Referral to community MSK service if no improvement following six weeks conservative management, particularly if the snapping is associated with pain.

Suspected labral tear

Clinical presentation

- Typically younger, athletic patients
- Sharp,catchy,clicky groin pain
- Restricted movement (usually flexion)

Investigations

- X-Ray not indicated
- MRI not indicated

Management

- Conservative management
 - Analgesia
 - NSAIDs
 - Rest from sport
- Referral to community MSK service if no improvement following six weeks conservative management