

Anterior hip pain is very common in active individuals, especially runners. Many times it feels like you can't extend your hip due to tightness. Pain typically increases during a speed workouts or hills. It can be very debilitating and often influences your life away from running. Sitting, crossing your legs, getting out of your car are common examples. If this is something you are dealing with, I would highly recommend seeking treatment from a health professional. This type of pain is not one you want to run through as there are possible repercussions later in life. I am not one to scare patients but this is an injury that can be tough to treat, especially if it has been around for a long time.

Our goal is to run today so that you can run tomorrow!

There are two common injuries that cause anterior hip pain. Femoral acetabular impingement (FAI) and lumbar spine referral. FAI can be broken down into functional FAI or structural FAI. A true structural FAI is diagnosed via x-ray and will show additional bone growth either on the ball or the socket or both bones of the hip.

Functional FAI is pain in the hip joint that mimics structural FAI but without the X-ray findings. In general we treat them similar but structural can be harder and take longer to treat.

The other source of anterior hip pain is referral from the lumbar spine. The low back can refer anywhere in the lower extremity and one of the first places it refers to is the hip complex. There are a few movements that you can perform to determine the source of your anterior hip pain.

The Diagnosis and Treatment:

Regardless of the location of your pain, there are a few simple tests that you can do that will help determine the type of exercise you need to perform to help your pain. During my evaluations in the office, I try to determine if the pain you are feeling is local pain (pain arising from the tissues near the site of pain) or spinal referred pain (pain arising from the spine that is referring to your site of pain). Just because you have pain in the front of your hip does not mean that the tissues in that area are primary pain generator.

Here is a simple process to figure this out. Before you do any testing or exercises, I want you to find a movement that is consistently painful. This can be just walking, squatting, lunges, or a stretch. Make sure you know the exact reps or distance when pain starts and rate your pain from a 1-10. Once you figure this out, you have established your baseline.

With the baseline established you are going to perform 2 simple exercises with your back. After each set of exercises, perform your baseline test again and see if anything changed (more reps or distance to feel pain and/or less intense pain).

Extension in Lying (Pressups)

This exercise may look familiar for you but it is a very powerful exercise. Perform 2 sets of 10. At the top of each rep, relax your back, glutes and legs and take breath out. Retest your baseline movement and see if anything changed.



Side Glides

You will perform this exercise only in one direction. If you have pain in your right arch/heel perform it with your left forearm against the wall. If its your left arch/heel, perform it with right forearm on the wall. Perform 2 sets of 10 and then retest your baseline movement.

R) Side Glide



L) Side Glide



If any of the above exercises helped reduce your pain then there is a good chance that part of your pain is spinal referred pain. Our spine influences our entire body and I am still shocked to this day how often pain completely unrelated to the spine is improved when performing repetitive spinal movement exercises. Whatever exercise improved your pain the most, you will perform that exercise 5-10 reps every 1-2 hours. I know it's a lot but dosage matters with pain and the more you perform the quicker your pain will get better.

But those exercises didn't help...

If the above exercises did not change your symptoms then there is a good chance your pain is not referred from the spine and is from local tissues. A good way to think about how the body works is to picture the body as a system of levers and pulleys. The body is also a continuation of tissue from muscle to muscle. Many times we think that muscles stop and end at a certain location and there is space between these muscles. In reality, the body is interconnected by muscles and soft tissue. There is no space between groups of muscles. Muscles look like one piece of tissue rather than delineated.

Knowing that tissue is connected to each other, think of the entire hip complex and how many muscles control your hip and leg movement. Pain in the front of your hip can be caused or influenced by any muscle associated with the hip. Here are the most common ones I've noticed in practice.

Lax Ball Psoas Release



Glute Med Figure



Sometimes crossing your leg in this position can be painful. If this is the case, avoid this exercise and perform the one below.

Glute Med Foam Rolling

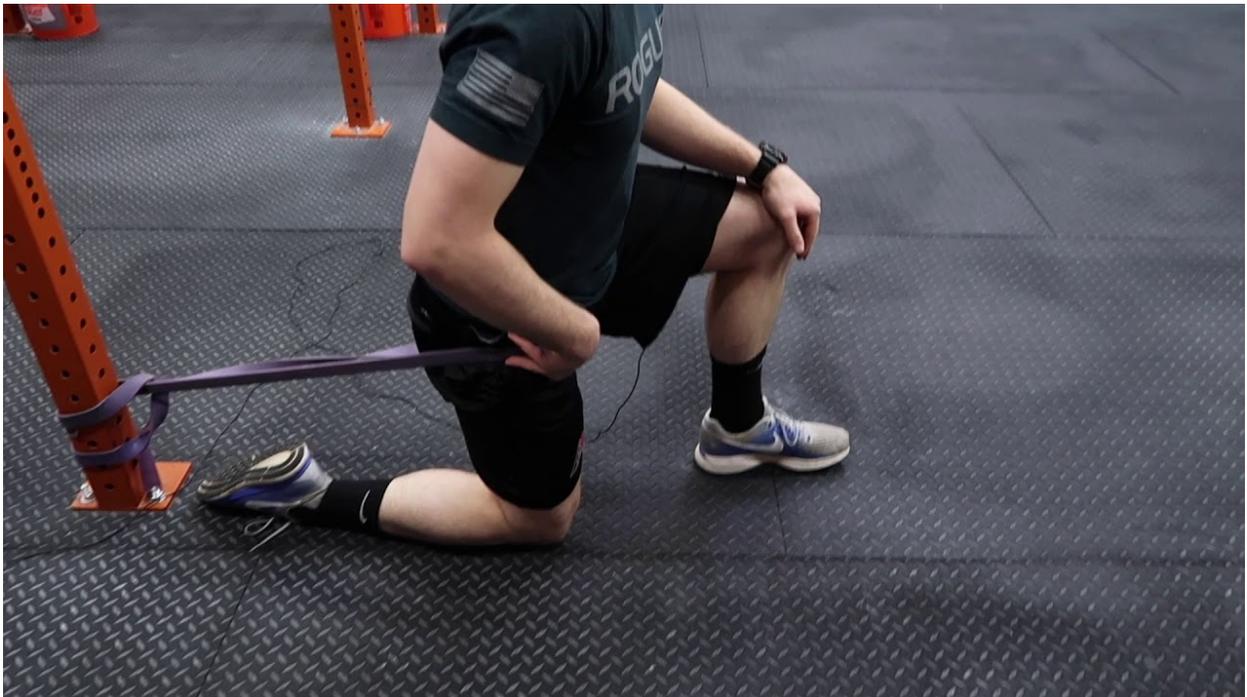


TFL Foam Rolling



This last exercise is a mobilization of the hip. This can do wonders for your hip pain. Make sure the movement is explosive. The more power from your hip the more effective the exercise. Feeling a quad stretch here is okay.

Banded hip extension



Wahhhh, nothing helps!!!

If nothing helps or only helps for a short period of time, I suggest you seek out a health professional that is experience treating runners. A good clinician will try to avoid shutting you down and will find modifications for your activity. A good clinician will always combine manual therapy work with exercises and rehab for your injury. Take care of your pain before it shuts you down and you have stop your training cycle.