

# Lateral Hip Pain

## Physiotherapy Patient Information

This is a booklet designed to support intervention provided by the Physiotherapy Department. It is not an exhaustive guide but contains information designed to support the management of your symptoms.

### What is lateral hip pain?

- A term used for pain on the outer aspect of the hip
- Also known as greater trochanter pain syndrome (GTPS), trochanteric bursitis or gluteal tendinopathy
- It usually involves overload and irritation to any of the tissues that lay over the bony prominence of the hip

### What are the symptoms?

- Pain on the outer aspect of the hip/thigh, and can radiate down the upper thigh. (Figure 1)
- Can be a deep ache or burning sensation
- Pain with certain movements of the hip. In particular walking uphill or stairs, running, getting out of low chairs and moving after prolonged rest
- Irritation from compression of the lateral hip structures, such as lying on it, crossing legs, putting too much weight through one leg



Figure 1: Distribution of pain

### Who gets it?

- Generally people between the ages of 40-60 (though younger people also can be affected)
- More common in women than men
- Having a higher body mass index (BMI)
- Often seen in combination with low back pain and hip osteoarthritis

### What causes it?

- Multi-factorial, meaning many different factors can contribute to its development, such as anatomy, weight, genetic, hormonal, personality and lifestyle can contribute to its occurrence
- Most commonly it occurs following a sudden change to activity - e.g. increase in walking or running, change of job physicality, or a trauma such as falling onto the hip
- Often there is underlying weakness of the muscles around the hip, especially gluteus medius and minimus (Figure 2)

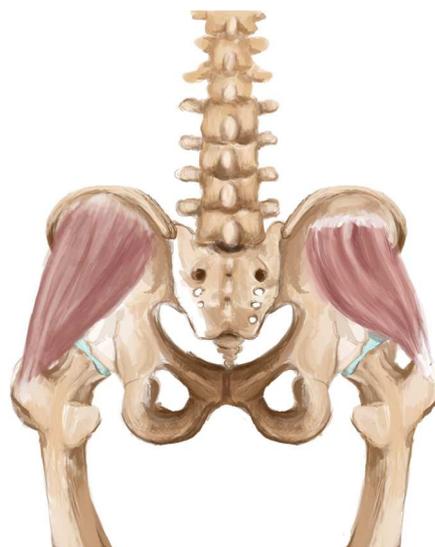


Figure 2: gluteus medius and minimus



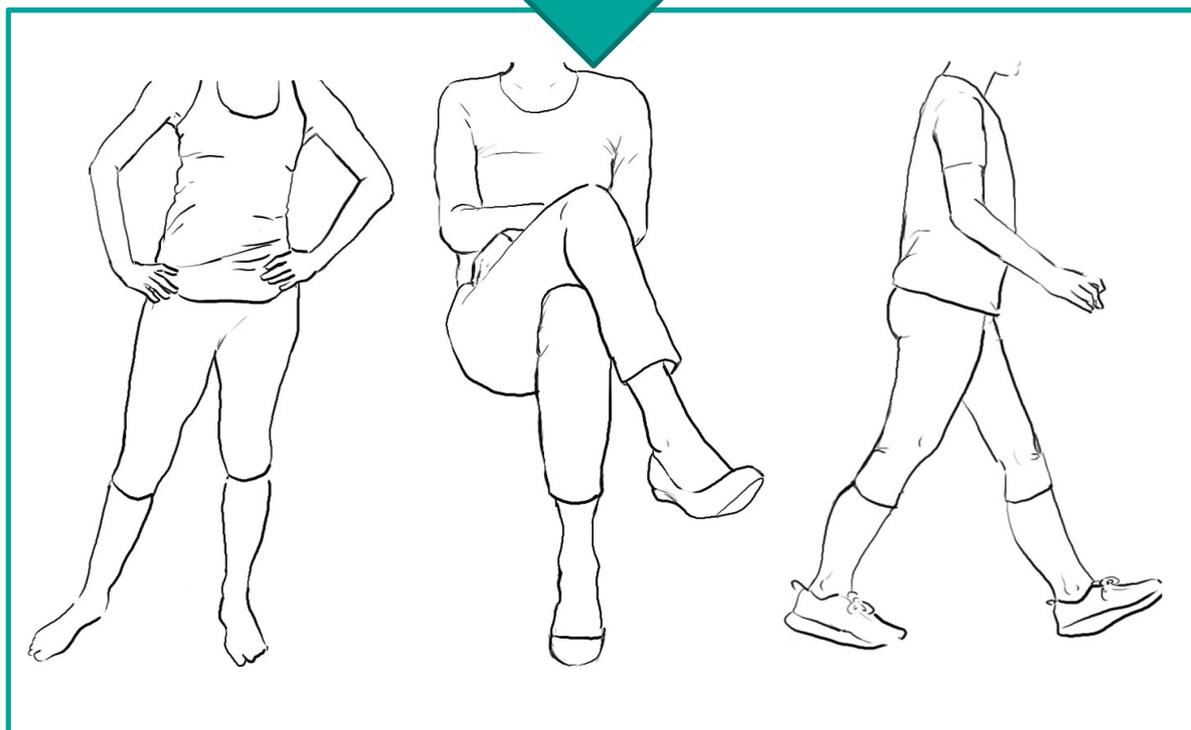
## How long will it take to improve?

- It can last anywhere from a few weeks to many years but on average settles within 6- 9 months
- It is normal to have flare ups during this time but may indicate a need to modify or reduce activities
- Hips are weight bearing joints so often take longer to recover as they are unable to have as much rest
- It is estimated that greater trochanteric pain syndrome resolves in over 90% of people with conservative treatment [National institute for Health and Care Excellence2016]

### Aggravating Activities:

Often aggravation is caused by compressing and/or overworking the sore tendons e.g.

- Lying on the affected side
- Prolonged sitting
- Putting more weight through one leg in standing (1),
- Over-stretching gluteal muscles(2)
- Loss of muscle control due to fatigue during walking and running (3).





## What can I do to help my hip pain?

- Find the level of activity (walking, work, exercise, housework) the hip can perform relatively comfortable, without significantly irritating the lateral hip pain:
  - Long-term is good to aim to complete enough activity per week to meet recommended government guidelines (150 minutes of moderate intensity activity a week or 75 minutes of vigorous intensity activity a week (see appendix 1). Medical research demonstrates multiple significant health benefits from participating in regular exercise. But the priority initially is to find the level that's right for your hip
- Maintain a healthy weight. Being overweight has multiple health implications. For more information visit [NHS: Health benefits of losing weight](#)
- Discuss pain relief with a pharmacist or GP as required
- Consider other strategies such as relaxation and mindfulness
- Complete a selection of the following exercises. Choose the exercises which you can comfortably perform whilst still challenging yourself. Progress and regress through the levels dependent upon your symptoms. Complete the exercises three times a week with at least a day's rest in-between
- Decrease you specific aggravating activities, such as:
  - Walking or running duration or intensity
  - Prolonged sitting, especially on long slung sofa
  - End range, prolonged stretching of the hip
  - When you are standing still, avoid leaning on one hip and keep your weight evenly through both feet and take the opportunity to perch rather than stand if available
  - Avoid sleeping on the aggravated side. If sleeping on the opposite hip, try placing a pillow between your knees to stop your painful leg crossing over
  - Avoid sitting with your legs crossed.
- Use either hot or cold packs. Either frozen peas wrapped in a damp tea towel or alternatively try a hot water bottle in a cover. Use whatever gets best results for you and ensuring no skin damage



## Key Messages

- Hurt doesn't equal harm – this means that pain is not a direct indication of damage
- The condition can take a long time to settle, as the quality of the tendon needs to improve which requires just the right load. This can be difficult to achieve and maintain as we need to use our hip every day when moving around
- Pain is multifactorial and lots of things impact it such as:
  - Poor sleep
  - High levels of stress
  - High BMI/Poor diet
  - High alcohol intake
  - Smoking
  - Low physical activity levels
- Reconditioning your hip and building up its capacity to do all the tasks you need it to do is a key part of your rehabilitation
- Striking a balance between respecting the sensitivity of your hip but working hard enough to recondition your hip is the key to successful rehabilitation

## How to decide how much activity is enough?

- You can score your pain out of 10, with 0 being no pain and 10 being the worst pain ever:
  - Don't let your pain exceed 4 out of 10
- Another way to think about it ...
  - You can push into a tolerable amount of pain (whatever that is, you decide)
  - It should calm down relatively quickly, at most within an hour or so and shouldn't affect your sleep that evening
  - If the pain impacts on your sleep and you still have elevated pain levels the next day, then it's likely you over did it. If this happens it is advised that you think about what and how much you did and aim to modify/reduce it to get the desired outcome

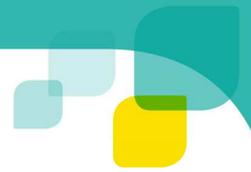
- E.g. when you go for a long hike with no breaks and have the pain. Next time make the hike shorter and have small regular breaks

## Exercise Program Advice

- There are multiple exercises in this booklet, they are set out in levels:
  - Level one is the easiest variation of the exercise
  - Once able to complete the desired amount you move on to the next level
  - You do not need to complete the previous level as well as the current one
- The exercise program aims for 3 sets of the exercises aiming to start at 5 repetitions and build up to 15 repetitions:
  - Repetition – completion of one of the exercises once
  - Set – completion of multiple repetitions
  - Holds – when you hold the position for a period of time
  - Rest – it's good to have between 1-2 minutes rest between each set
- If you can complete 3 sets of 15 repetitions, relatively comfortably on a level this is when you would move on to the next level:
  - Some of the exercises require holds – the aim is to still achieve the top amount of 3 sets of a 30 second hold

## How hard should I work?

- You can follow the advice given around the discomfort settling within an hour, not disturbing sleep and calming by the next day initially
- Another method is using the reps in reserve principle:
  - This is when you think about how more repetitions you could do until failure. Your aim is to only have 2-3 reps left before failure
  - E.g. you do 10 reps of exercise one, you feel like you could have done 5 more – this is too easy  
Whereas you do 12 reps of exercise one and you feel you could have got 2 more that is the correct dosage
  - You should aim to get to 3x15 repetitions and still feel like you could do 2-3 reps more, that's when you know you have completed that level



## How often should I exercise?

- Minimum would be x3 sessions per week and at most x5 sessions per week, this allows for adequate rest days which are important
- A session should contain 1 - 4 of the main exercises:
  - You can do different exercises on different days  
e.g., Monday = exercise 1+3, Wednesday = exercise 2+4
  - You could do all the exercises on each day, there is lots of variety available
  - You may start with just one exercise, and slowly you add more in over time

## Progressions and Regressions

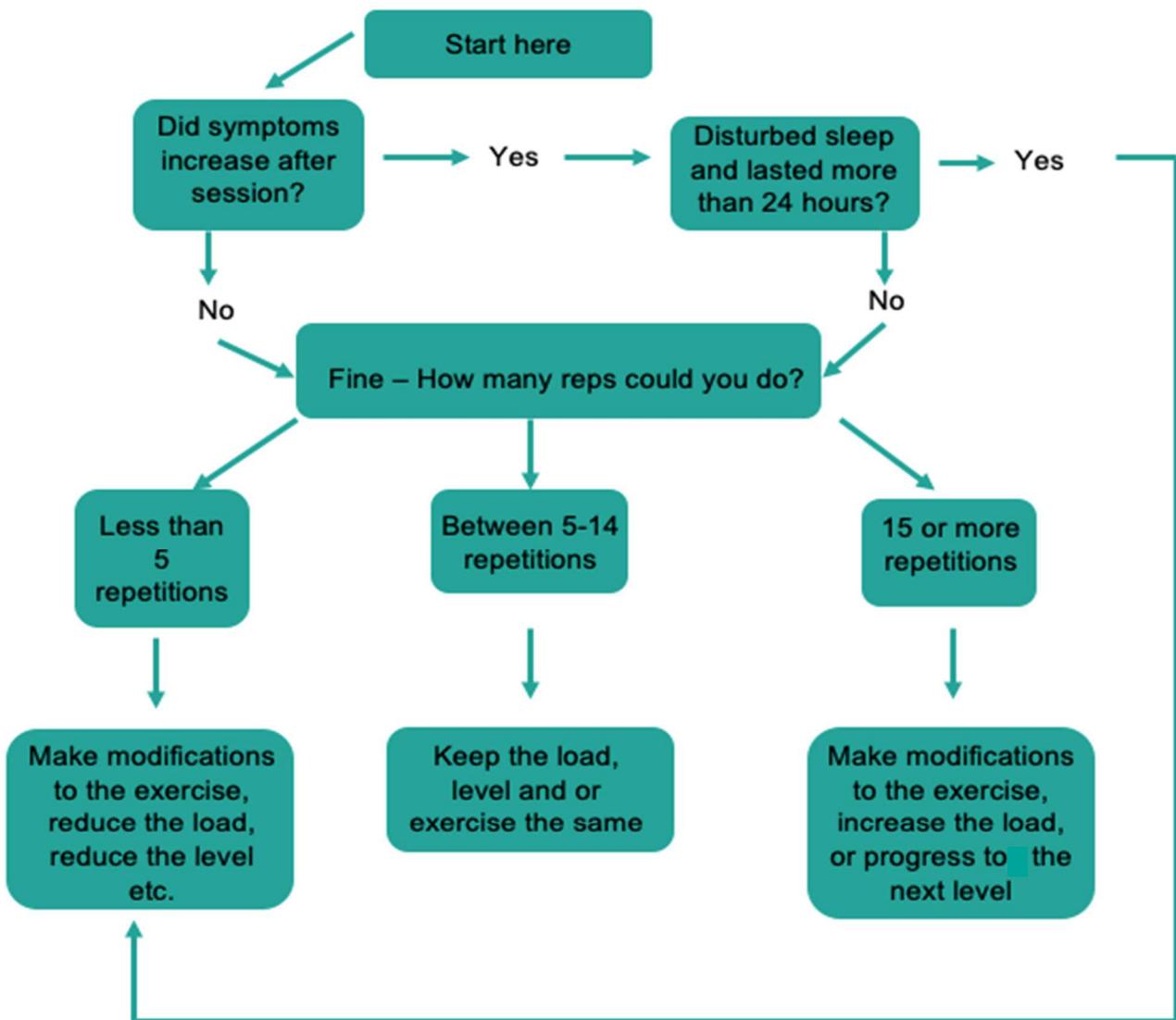
- These exercises are on a continuum and naturally you may find yourself moving up and down between the levels, what you are looking for is an overall trend showing an increase in tolerance and capacity by doing more exercise
- It's natural for your pain to fluctuate, so if one day you are on level 3 of an exercise but due to pain you need to go down to level 2 this is perfectly acceptable
- If you feel you are ready to progress, but the next level up is too much, you can continue to work at the current level but make that level more challenging by:
  - Slowing down the movement
  - Increasing the weight used at that level
  - Take less rest between the sets
- If you feel you are working at a level but don't want to regress down a level, you can make modifications to make the level more tolerable:
  - Reduce the amount of repetitions
  - Reduce the amount of load/weight
  - Reduce the range of motion



### Equipment for the exercises

- A resistance band
- Gym ball
- A step (if you have stairs these should be fine)
- Comfortable clothes

### Exercise programme flowchart





## Exercise one

### First Exercises set – hip abduction

1. Standing hip abduction to toe touch



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*Starting standing one hand on the wall for support. Bring one leg out to the side in a straight line and tap the floor then bring it back in.*

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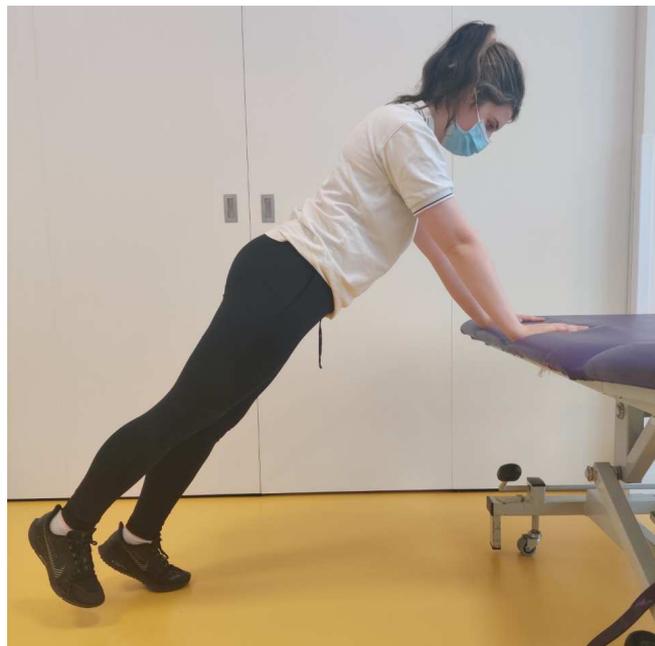
↑ ***You can progress by letting your foot hover over the ground***

2. Side incline hip abduction to hover

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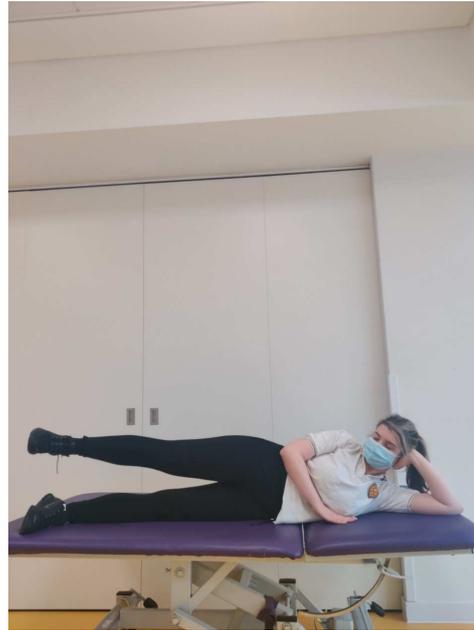
*Leaning forward place your hands into a supportive position. You should be able to draw a straight line from your head to your feet and your tummy muscles should be engaged. Slowly bring out one leg to the side and then let it hover for 5 seconds.*

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### 3. Side lying hip abduction

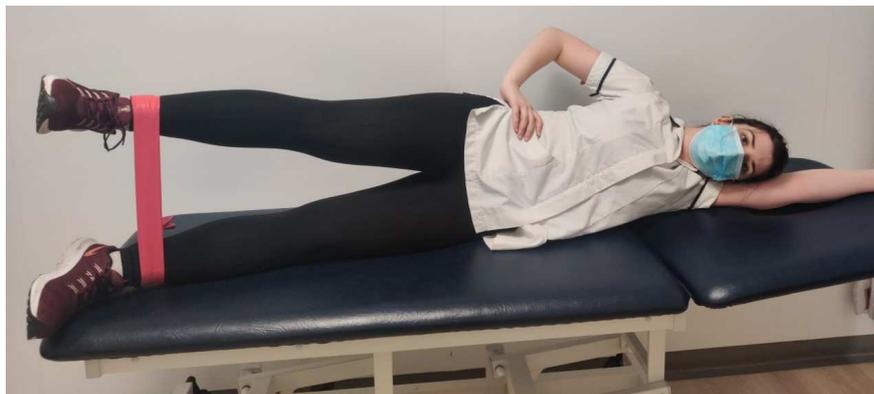


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*Lie on your side, your body in a straight line. Keep your legs straight. Raise the uppermost leg, focusing on using your buttock muscles. Return to the starting position.*

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### 4. Side lying hip abduction with weight or resistance



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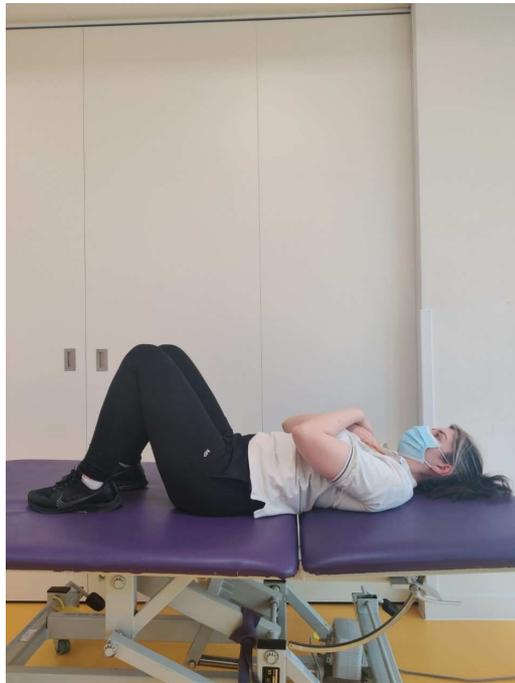
*This can be progressed by adding a band just above your knees or to make it even harder just above ankles.*

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## Second exercise set – bridging

### 1. Buttocks squeeze



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*Laying on your back with your knees bent, slowly squeeze your glute muscles and hold this for 5 seconds and then slowly release.*

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### 2. Bridge double footed

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*Start by lying on your back with your legs bent and feet flat on the floor. Cross your arms over your chest.*

*Lift your buttocks off the floor and straighten your hips. Return to the starting position.*

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↑ ***This can be progressed by adding a band to your thigh and pushing out***



### 3. Bridge with offset feet



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*Start by lying on your back with your legs bent and feet flat on the floor. Now place one foot slightly more forward so it is off set from the other foot*

*Lift your buttocks off the floor and straighten your hips. Return to the starting position.*

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### 4. Single leg bridge

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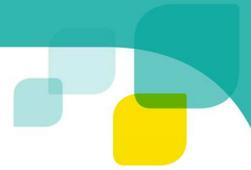
*Start by lying on your back with your legs bent and feet flat on the floor. Cross your arms over your chest.*

*Now lift one leg up so you are holding it level with the opposite thigh. You will be hold this leg throughout.*

*Lift your buttocks off the floor.*

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Third exercise set – squat (lead movement with bottom)

1. Mini (1/4) squat with band resistance to abduction



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*Start by standing with a mini band around your knees (slightly above or under). Your legs are approximately hip-width apart or slightly wider and toes pointing forwards or slightly outwards. Arms can be crossed over chest or placed on your hips or they can move along with the squat.*

*Squat down, move your hips back and bend your legs. Press your knees outwards against the resistance from the band to keep toes, ankles, knees and hips aligned. Feel the tension in your thighs and buttocks. Push back up to standing and straighten your knees and hips.*

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2. Moderate (1/2) squat with band resistance to abduction

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*You can progress the last exercise by doing the same motion but going deeper into the squat. Try to stick your glutes out and keep your knees from going over your toes.*

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### 3. Mini (1/4) squat with offset feet



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*Stand with your feet hip-width apart, with one leg placed a short step forward. Shoulders are pinned back and down. Hold your hands in front of yourself.*

*Squat down to a half height keeping your trunk upright and knees aligned with the toes. Push through your heels stand up fully by straightening the hips and knees.*

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### 4. Moderate (1/2) squat with offset feet

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*You can progress the last exercise by doing the same motion but going deeper into the squat. Try to stick your glutes out and keep your knees from going over your toes.*

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### 5. Split squat



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*Start by standing in a long split-stance position (one leg in front of the other with hips level). Squat down and hold the position. Lift the heel of your front foot and straighten your ankle, hold and then lower the heel back to the starting position.*

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Advanced (lower irritability exercises)  
Fourth exercise set

1. Bulgarian squat

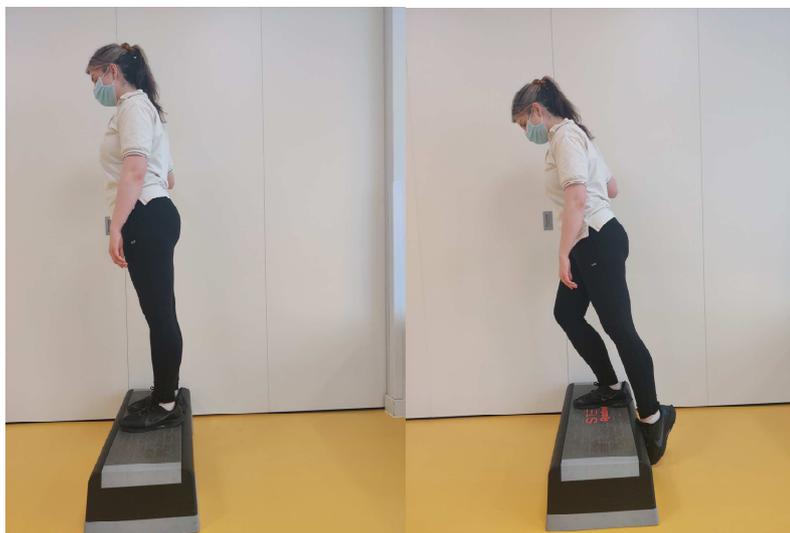


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*Stand with your feet hip width apart. Place one leg behind you on a chair. Bend the leg in front. Do not let your knees turn in or out. Keep your back straight. Return to the starting position.*

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2. Reverse Step downs

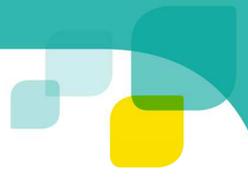


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*Standing on a step (holding onto the wall or rail for support of needed). Slowly bring one leg behind you until you can tap the ground behind you, then bring your foot back onto the step. Try and keep your back straight.*

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↑ ***Both of these can be progressed by holding a weight in one or both hands***



Fifth exercise set

1. Side plank on knees



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*Lie on your side with your knees bent. Support your body weight on your forearm and knee.*

*Tighten your stomach muscles and keep your neck and back straight. Then lift the hip off the ground trying to stay aligned.*

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2. Side plank on feet

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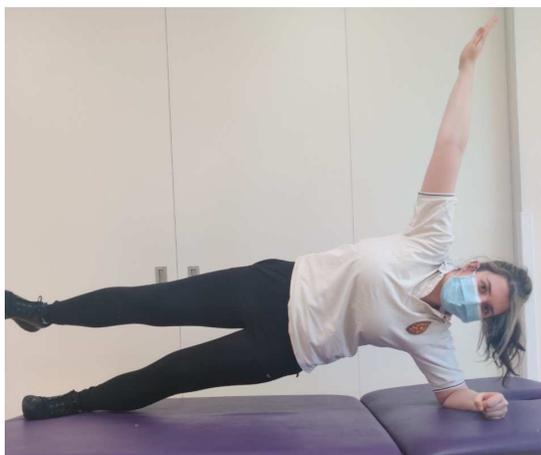
*Lie on your side with your knees bent. Support your body weight on your forearm and knee.*

*Lift your pelvis up to the side plank position. Reach your upper arm towards the ceiling. Lengthen the spine and breathe deeply.*

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3. Side plank on feet with top leg hip abduction



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*Starting in the same position as you would in the previous exercise. Now after you lift your pelvis, lift the top the leg slightly so it is in aligned with your torso.*

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### Exercise tracker

	Exercise number									
	1		2		3		4		5	
	Level	Reps	Level	Reps	Level	Reps	Level	Reps	Level	Reps
Monday										
Tuesday										
Wednesday										
Thursday										
Friday										
Saturday										
Sunday										

## Appendix 1

What is moderate intensity activity?

Any activity which increases your heart rate to a level where you can talk but not sing! For examples:

- Brisk walking
- Dancing
- Cycling

What is vigorous intensity activity?

Any activity which increases your heart rate to a level where you can only say a few words before pausing for a breath. For example:

- Running
- Cycling uphill

For more information visit [NHS exercise guidelines](#)

For further information:

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