

## GTPS Information & Exercise

# Greater Trochanteric Pain Syndrome

Greater Trochanteric Pain Syndrome (GTPS) is a very common condition affecting the hip, buttock, and can sometimes affect the groin and as far down as the knee.

GTPS is an umbrella condition, meaning there are often a number of causes for the symptoms.

For most people defining the exact type of GTPS will not change the way it is treated, as the causes and treatments are similar.



## Causes

There are many causes of GTPS. It is more common in people over 40 years old, it affects women more than men and can affect both hips at the same time. You are more likely to develop this condition if you have lower back pain, osteoarthritis of the hip or knee or are overweight.

As well as the above-mentioned factors the following conditions will also contribute to GTPS:

- Inflammation of one of the bursae (a small sac filled with fluid for cushioning of tendons and bones).
- Reduced strength, flexibility and overall fitness around the hip, buttock and lower spine.
- Postural habits, for example; crossing your legs, lying on affected side, standing on one leg for long periods

## Symptoms

Symptoms of GTPs can vary from person to person. This will largely depend on the factors contributing to the cause:

- Pain is located on the outside of the hip/ buttock and can travel to the groin or down the outside of the thigh towards the knee.
- Pain while walking or standing for prolonged periods.
- Pain during aggravating postures; sitting cross legged or standing with your hip hitched to the side.
- Pain during the night; laying on the affected side and sometimes on the opposite side.

## Management

In order to manage the symptoms of GTPS you must avoid aggravating activities as much as you are able. At the same time you should exercise to improve the condition of your hip muscles.

Doing this consistently over a significant period of time resolves the symptoms for the majority of people.

## Useful Tips

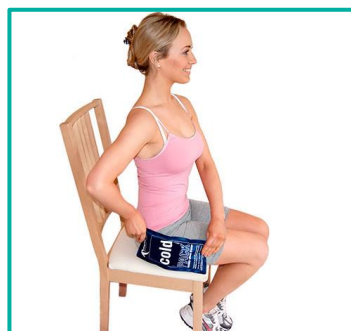
- Avoid sitting with your legs/feet crossed, this will reduce the stress on the affected area.
- Avoid sitting with knees wide apart or too close together.
- Try to avoid pushing out onto one hip while standing (Hip hitching).

- Keep active/increase your general activity without overdoing it (Little and often) with activities that don't aggravate your symptoms.
- If you have pain on the stairs then use hand rails and supports; go up the stairs with the non-affected leg leading and come down with the affected leg leading.

## Pain & Symptom Management

### Sleeping Positions and Postures:

- Avoid laying on the affected side, use a cushion/cushions between your knees/legs when sleeping on the opposite side.
- Try to sleep on your back with a cushion underneath your knees.



### Useful Tips;

- Try to stay as active as possible
- Try to stay at work even if you have to modify your activities.

## Pain Relief

### Ice/Heat

Using Ice to cool or Heat to warm the painful area can be helpful in managing pain, swelling and help the healing process. The smaller the body area the less time you will need to keep the ice or heat on. Start with 5 minutes but no more than 15/20 minutes per body part.

Use a damp towel between yourself and ice to prevent any cold burns. Use a dry towel between yourself and the heat to prevent heat burns. Regularly check your skin while using ice or heat and remove immediately if any burns or injury occurs.

Use Ice for Pain relief or *after* activity/exercise.

Use heat for pain relief or *before* activity/exercise.

### Medication

Over the counter pain relief or anti-inflammatory medication can be used to reduce your pain so you can be more active or complete your exercises.

All medications have side effects and must be used carefully. Paracetamol and ibuprofen are the most common over the counter painkillers. However, some medical conditions will prevent you from taking them, so you should always check with your GP or Pharmacist to ensure they are safe for you.

If you decide to take pain medication it is important to take them at the recommended dose and to take them regularly to prevent a flare up of your symptoms and allow you to remain active and continue exercising.

Don't wait until your pain is severe before taking the pain killers as they won't work as well.

### Corticosteroid injections

A corticosteroid injection may be suggested if your symptoms aren't resolving with the above advice. A corticosteroid injection can be used to help settle pain and inflammation. This will not resolve the problem but may help to reduce pain and inflammation so you find it easier to do the exercises.

### Further Investigations

Scans and x-rays are not routinely required to diagnose this condition. In some situations, they may be requested to rule out other conditions.

## Prognosis and Other Symptoms

Research shows that 3 out of 5 people recover within one year; however, everyone is different, and some people can take longer.

Treatment focuses on improving the condition of the muscles that support your hip and avoiding aggravating activities as much as you are able. Improving muscle condition requires regular exercise, some examples of which you can find below. It will usually take several months to see any significant improvement

If:

- Your symptoms do not appear to be the same nature or pattern as described in this leaflet.
- Your symptoms have not improved or are becoming worse.
- You feel generally unwell and have a high temperature or feel hot and shivery
- You have very severe joint pain that isn't settling with the above advice.
- Your hip joint is locking or giving way.

**Then please contact your GP for a review.**

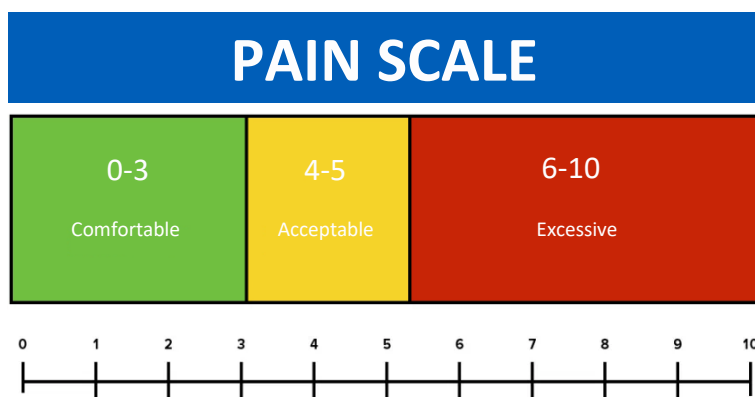
## Exercise

Pain during exercises should be manageable. Aim to stay within the green and amber zones. If experiencing excessive pain then you can modify the exercise, and then slowly build it back up over time;

- Reduce the range of movement
- Reduce repetitions
- Reduce the resistance/weight being used
- Slower, less intensity and control the movement more
- Increase the rest between each set of exercises

Progress onto the next stage of exercise once they become easier and you can fully complete the exercises in the comfortable zone of the pain scale.

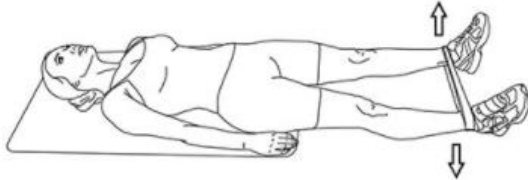
- Pain after exercise should settle to your pre exercise levels within 30-60 minutes.
- Pain or stiffness due to exercise in the next morning should not last longer than 60 minutes.
- Use your pain relief, ice/heat or anything else you have found that eases your symptoms to help manage.



## Stage 1

### Hip Abduction with Band

Lay on your back with legs straight and feet pointing upwards. Tie an exercise band around your ankles and gently pull your legs open to tension the band.

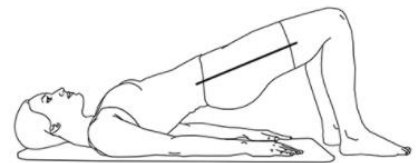


If you do not have a band, then place the outside of your foot against a wall and push against it.

Hold for 30 seconds x 3-4 times | Perform 1 times daily

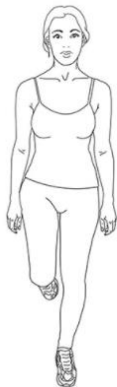
### Glute Bridge

Lay on your back. Feet and knees shoulder width apart. Have your feet close to your bottom, allow your pelvis to curl off the ground, and push your hips up straight. Slowly lower back down. Try to prevent the knees and rest of your body from wobbling.



Repeat 10 x 3-4 times | Perform 1 times daily

### One Leg Stand



Stand on one leg and try to keep your balance. Be careful and hold onto a wall or solid surface for support to start. Stand tall through your spine, hips and ankles. Try to keep the pressure on your little toe, big toe and heel the same throughout.

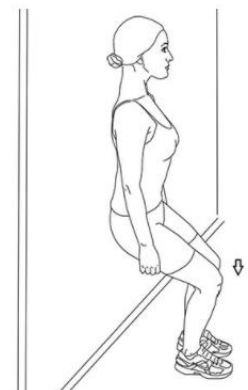
Hold for 60 seconds+ | Repeat 3-4 times | Perform both sides | Perform 1 times daily

### Wall Squat

Place your back, shoulders and hips against the wall, and stand with feet slightly out in front of you. Feet and knees should be a little wider than shoulder width apart.

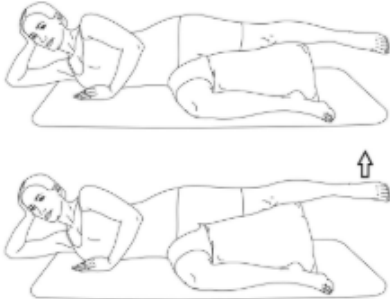
Slide down the wall approx. 30 cm and then stand back up, try to prevent your knees and ankles from wobbling. Keep your shoulders, back and hips against the wall.

Rerepeat 10 x 3-4 | Perform 1 times daily



## Stage 2

Repeat 10 x 3-4 times | Perform 1 times daily | Perform both sides



### Glute Bridge with leg Lift

Lay on your back. Feet and knees shoulder width apart. Have your feet close to your bottom, allow your pelvis to curl off the ground, and push your hips up straight.

Slowly lower back down. Try to prevent the knees and rest of your body from wobbling.

Repeat 10 x 3-4 times | Perform 1 times daily



### Single Leg Stand with Eyes Closed

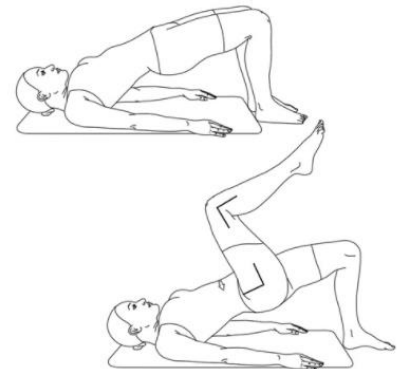
Stand on one leg with your eyes closed and try to keep your balance. Be careful and hold onto a wall or solid surface for support. Once safe then close your eyes.

Stand tall through your spine, hips and entire leg. Try to keep the pressure on your little toe, big toe and heel the same, don't allow the arch of your foot to collapse to the floor.

Hold for 60 Seconds | Repeat 3-4 times | Perform 1 times daily.

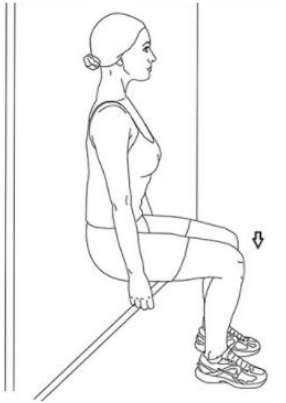
### Hip Abduction

Lie on your side with the affected leg on top. Place a cushion underneath the leg so it does not drop to the floor. Keep the leg in line with the body at all times. Lift your leg off the cushion, leading with your heel, as high as comfortable and hold 5 seconds. Slowly lower the leg back to the pillow.





### Full Wall Squat



Place your back, shoulders and hips against the wall, and stand with feet slightly out in front of you. Feet and knees should be a little wider than shoulder width apart.

Slide down the wall as low as comfortable and then stand back up, try to prevent your knees and ankles from wobbling. Keep your shoulders, back and hips against the wall.

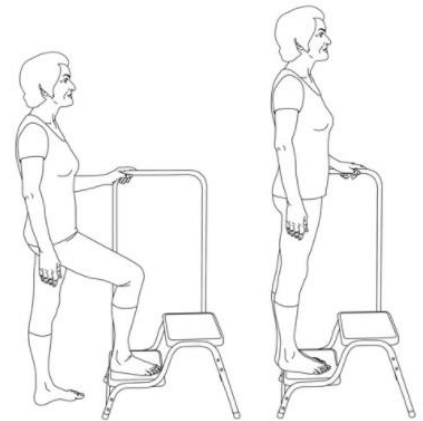
Rerepeat 10 x 3-4 | Perform 1 times daily

### Step Up with Support

Place your foot on a small step or bottom step at home. Hold onto the banister or solid surface if required. Start with the affected leg, step up onto the leg, and then slowly step back down.

Don't allow your bodyweight to flop/fall down. Try to prevent the knees from wobbling as you step up and down.

Repeat 10 x 3-4 times | Perform both sides | Perform 1 times daily



## Stage 3

### Hip Abduction



Lie on your side with affected leg on top. Keep your leg in line with your body. You can bend the bottom leg for balance if needed. Raise the top leg as high as possible leading with the heel. Slowly lower back down.

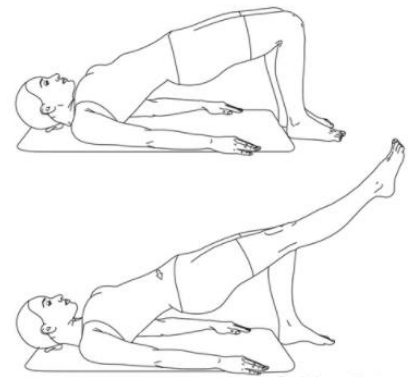
Repeat 10 x 3-4 times | Perform 1 times daily | Perform both sides

### Glute Bridge with Leg Hold

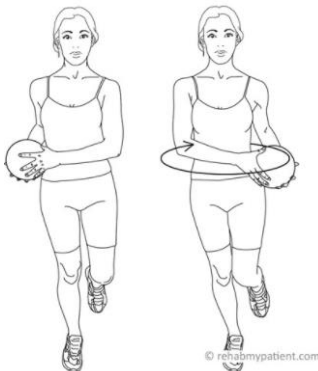
Lay on your back. Feet and knees shoulder width apart. Have your feet close to your bum. Squeeze your bum muscles, allow your pelvis to curl off the ground, then push your hips up straight. Slowly straighten out one knee.

Hold for 5-10 seconds then slowly place the foot back down and repeat on the opposite leg. Try to prevent the knees or any part of your body from wobbling.

Repeat 5 times each leg x 3-4 times | Perform 1 times daily | Perform both sides



### Single Leg Balance with Ball Pass



Stand on one leg and try to keep your balance. Be careful and hold onto a wall or solid surface for support when you first start.

Stand tall through your spine, hips and leg. Try to keep the pressure on your little toe, big toe and heel the same, don't allow the arch of your foot to collapse to the floor. Whilst balancing pass a ball or any small light object around your back.

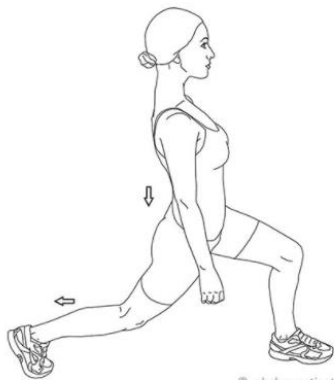
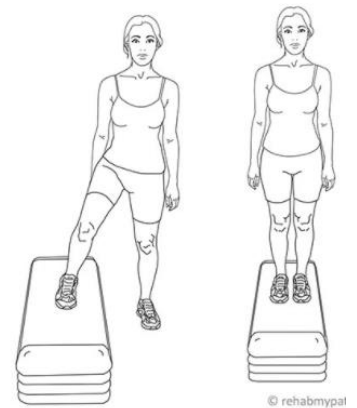
Hold 30 seconds | Repeat 3-4 times | Perform 1 times daily

### Step Up Side On

On a small step or the bottom stair at home, stand sideways on. Hold onto a solid surface or handrail for support if needed. Start with the affected leg on the step. Step sideways up onto the step.

Slowly step back down to the floor, leaving the affected leg on the step. Do not flop down, control your landing. Try to prevent your knee from wobbling while doing this exercise.

Repeat 10 x 3-4 | Perform 1 times daily | Perform on both sides



### Backward Lunge

Stand next to a chair or solid surface and hold for balance. Start with feet shoulder width apart and stand up tall. Step backwards with the non-affected leg, while bending the front leg at the hip and knee. Try to prevent the front knee and ankle from wobbling. Drive back knee behind you straight down towards the ground. Lunge down as low as comfortable then step back up.

Repeat 10 x 3-4 | Perform 1 times daily | Perform both sides.