Trochanteric Bursitis

What is trochanteric bursitis?
The trochanteric bursa is a sac of fluid that sits just above the femur (long leg bone). It helps to lubricate the joint where tendons from the muscles insert onto the femur. Sometimes this sac of fluid becomes irritated and inflamed, causing pain in the hip.

The gluteus medius tendon (the main involved muscle) and tensor fascia (connective tissue) run over the outer femur and rub on the bursa with repeated flexing. This causes the thin sac of fluid to become thick and inflamed so that it cannot cushion the hip well. This often comes from a problem with a person’s gait (how they walk) because of other pain such as back pain.

Anatomy
**Symptoms**
- Pain with walking on the lateral (outside) part of hip
- Trouble walking
- Tenderness over the trochanteric bursa
- Pain may be somewhat mild, or so severe that it interferes with sleeping

**Risk Factors**
- Anything that could affect gait (low back problems, leg length difference, SI joint disorders, knee arthritis, ankle sprain)
- Overweight
- Repetitive motions of the hip, especially flexing the hip
- Hip surgery

**Diagnosis**
Diagnosis of trochanteric bursitis is mainly a clinic diagnosis that requires evaluating symptoms, as well as ruling out other causes of hip pain. On the physical exam, tenderness is usually present over the trochanteric bursa, and sometimes this pain will go down the outside of the leg. In severe cases, swelling can be seen. Also, there is often stiffness with both internal and external rotation of the hip, but this is not specific to this disease. One special test that can be used to evaluate for trochanteric bursitis is Ober’s test, which tests for iliobibial band (IT band) tightness. This is a band of muscle that runs over the trochanteric bursa.

There may be an antalgic gait, meaning the patient favors the affected leg, but this is not specific either. X-rays should generally be done if trochanteric bursitis is suspected, in order to rule out other causes of hip pain. Finally, regional anesthetic (an injection of pain medicine) can relieve the pain, and help differentiate it from pain that originates in the spine.

**Treatment**
The primary method for treating trochanteric bursitis includes heat application and stretching exercises. Heat application helps to relax the muscle, especially prior to stretching. Often, these exercises are performed with the help of physical therapists as part of a specific recovery regimen. Stretching of the muscles that overlay the bursa is most important.

Examples of helpful exercises are noted below. A complete physical therapy regimen will be personalized to the patient’s specific needs, which vary significantly depending on the specific muscles that are tight, and what mechanism caused the bursitis.
**Iliotibial (IT) band stretch**
Lie on side with the affected hip facing upward, and bring the other knee forward as shown. Use the foot put downward pressure on the affected leg. Hold for 30 seconds 5 times.

![Iliotibial (IT) band stretch](image)

**Two joint hip flexor stretch**
Wrap a cloth around the ankle of the affected leg. While lying on the table, pull back on the cloth as shown keeping the leg bent. Hold for 30 seconds 5 times.

![Two joint hip flexor stretch](image)
Side wall lean
With the affected hip facing toward the wall, lean body toward the wall, stretching the IT band of that hip. Hold for 30 seconds 5 times.

Other therapies that may be useful include the following:
1. Oral Medications: NSAIDs such as naproxen or ibuprofen are helpful for pain relief.
2. Injections: Corticosteroid injections directly into the bursa may relief inflammation and pain.
3. Correcting underlying problems with gait: Includes orthotics, for example, for foot problems.
4. Decreasing weight bearing: Weight loss, temporary crutches
5. Decreasing bending over
6. Sit with leg slightly externally rotated and abducted (out to side)
7. Avoid pressure on the bursa

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Reference
4. UNC Physical Therapy.