



**DES MOINES
ORTHOPAEDIC SURGEONS, P.C.**

DMOS – West
6001 Westown Parkway
West Des Moines, IA 50266
515-224-1414
800-245-6129

DMOS – East
Penn Medical Plaza
1301 Pennsylvania Ave., Suite 213
Des Moines, IA 50316
515-263-9696
800-688-3980

DMOS – Carroll
405 S. Clark St., Suite 250
Carroll, IA 51404
712-792-2093
877-284-1428

Hip Pain in the Athlete
By David Vittetoe, M.D.

Hip pain is a common complaint in athletes, particularly in those participating in high-impact sports. There are many causes of hip pain. Some are serious and many are treated by simple means.

One of the most serious causes of hip pain in the athlete is a stress fracture of the femoral neck (hip). Fortunately these fractures are rare, but can be catastrophic. A stress fracture is a partial, or incomplete fracture of a bone. If a stress fracture of the hip is untreated it can result in a complete fracture where the bone actually breaks and often leads to long-term hip problems. Stress fractures of this type are most common in runners who rapidly increase their distances rather than gradually ramping up their training program. Symptoms of a stress fracture include pain in the groin, knee pain and a limp. If these symptoms develop in a runner evaluation should be sought to rule out this potentially life altering injury. Stress fractures are often difficult to diagnose and may not show up on x-rays. An MRI is usually ordered if there is suspicion of this injury. The risk of stress fractures can be minimized by gradually increasing the intensity of a high-impact exercise program.

Muscular injuries are a more common cause of hip pain in athletes and many of these injuries are self limited. Occasionally the major muscles of the hip can avulse, or tear away from the bone similar to a rotator cuff tear in the shoulder. Symptoms of this type of injury are the sudden onset of pain over the lateral side of the hip and the onset of a limp. Muscle avulsions may require surgery in some cases, while other cases can be treated with conservative measures. Stretching before and after workouts is important to reduce the likelihood of muscle injuries about the hip.

The hip is a ball-and-socket joint and has a cartilaginous structure called the labrum around the opening of the socket. The labrum helps to provide stability to the joint and distribute forces across the joint. Like the meniscus in the knee, the labrum in the hip can tear and cause symptoms of pain. Athletes with labral tears often have symptoms of groin pain and mechanical symptoms of “catching” or “locking” of the hip. Labral tears are usually diagnosed with an MRI and can often be treated with arthroscopic surgery but sometimes require open surgery for repair.

Osteoarthritis of the hip is a common finding in middle-aged or older athletes. This type of arthritis causes the cartilage in the joint to gradually deteriorate and many patients with arthritis will experience activity related joint pain. Arthritis symptoms are characterized

by pain which is often described as dull and located in the groin, buttock, thigh or sometimes the knee. Symptoms are usually increased by activity and relieved by rest. Pain at night time is common in patients with hip arthritis. Arthritis is usually diagnosed with an x-ray. Having arthritis does not mean that exercise should be avoided. Activity is important to maintain joint health and exercise does not speed the progression of arthritis. Many patients with hip arthritis don't tolerate high-impact sports such as running or racquetball but can participate in lower impact activities like cycling, swimming or using an elliptical machine. Nonsteroidal anti-inflammatory medications often help with arthritis related symptoms. These medications are well tolerated by most people, but if they are used on a regular basis your physician should be made aware so that possible side-effects can be monitored.

Hip pain in athletes is common but most causes are benign and due to muscular strains. Stretching and making gradual changes in the intensity of your training program are important and will help avoid most injuries. Sudden or severe pain about the hip should be evaluated by a physician.

Dr. Vittetoe's practice focuses on reconstructive surgery of the adult hip and knee. He completed his fellowship in adult reconstructive surgery at Massachusetts General Hospital/Harvard Medical School and subsequently returned to practice in Iowa, where he was raised. In addition to primary hip and knee replacement, he has considerable experience in complex joint replacement and revision arthroplasty. His interests also include sports-related injuries of the hip and knee and arthroscopy. To reach Dr. Vittetoe or to schedule an appointment please contact DMOS – East at 515-263-9696.