

Editorial





# Trochanteric bursectomy

## **Editorial**

Trochanteric bursitis causes pain to be felt on the side of your hip which may be particularly felt at night if sleeping on the affected side. Although most patients respond to corticosteroid injections, rest, physiotherapy, stretching, and anti-inflammatory medications, those with persistent symptoms may require an operation. A bursa is a fluidfilled sac that functions as a gliding surface to reduce friction between tissues of the body. The hip bone has a bony prominence that can be felt on the side of the hip which is known as the greater trochanter. The Trochanteric bursa is located over this bony prominence, and is the bursa that is most commonly inflamed around the hip (Figure 1).

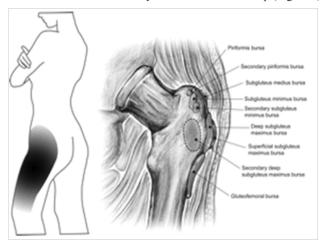


Figure I Trochanteric bursa.

## Non surgical treatment

## **Anti-Inflammatories**

Anti-inflammatory, commonly known as non-steroidal antiinflammatory drugs (usually abbreviated as NSAIDs or NAIDs) are used primarily to treat mild to moderate pain associated with inflammation. This inflammation may be the result of muscular tears, bursitis, tendonitis, arthritis, labral tears, or synovitis. Antiinflammatory are also used as a first line treatment in conjunction with a strengthening program. Post-operatively, they are prescribed as well.

# Physical therapy

Physical therapy is an integral component to the multi-faceted team approach of examining and treating hip pain. The importance of physical therapy at the center for Hip Preservation is to assist in gaining an understanding of the underlying causes of hip pain and then to collaborate with a team of physicians in order to design a comprehensive treatment approach. Rehabilitation is useful in many ways. It may be used as a non-invasive approach to treatment, whereby

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surgery for the patient is not or no longer indicated. The hip joint is a very deep joint surrounded by almost 30 muscles. Physical therapy aims to strengthen these muscles, increase flexibility, maintain range of motion of the joint, and decrease the associated inflammation. In the case of a labral tear, physical therapy will not heal the tear. With the appropriate muscular training and activity modification, however, the condition may become asymptomatic and therefore require no surgery. If operative treatment is inevitable, a pre-operative physical therapy program will provide the ability to address nearly all underlying joint problems or muscle imbalance, which ultimately leads to a better outcome. Additionally, in the event of surgery, postoperative therapy is essential in educating the patient regarding daily activities and in providing an appropriate recovery course. Physical therapy is an integral component in the management of hip pain.

#### **Injections**

Injections are commonly prescribed to help relieve a patient's pain as well as to diagnose the direct cause of the pain. Following an injection of a numbing drug into the area, immediate relief from pain will help confirm that the source of pain. If complete pain relief is achieved, the area is likely to be the source of pain. If not, further consideration of a possible cause is needed.

## Surgical treatment

### The Operation

The operation involves removing the inflamed bursa and releasing the tension in the ilio-tibial band by making an incision in the band where it crosses the greater Trochanteric and removing any bone spur that cause the irritation. The scar is behind the hip area, and relatively small.

#### The Post-operative period

You stay either one night at the hospital or go home the same day. You will need crutches for 3-5 days. There will be some wound discomfort for few days. You will have one or two physiotherapy sessions. You can drive and work after 1-2 weeks from the surgery.

#### Conclusion

You will be seen at the clinic six weeks after the operation.



