

# HIP OSTEOARTHRITIS

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## MEET YOUR TA 😊

Winston-Salem, NC

Double Tarheel

My gap year in OBX

Interests: outpatient ortho and geriatrics

Fun fact: love a crossword puzzle



# OUTLINE

- What is hip OA?
- What to look for in clinical exam
- Differential Diagnosis
- CPRs
- Intervention
- Outcome Measures
- Lab

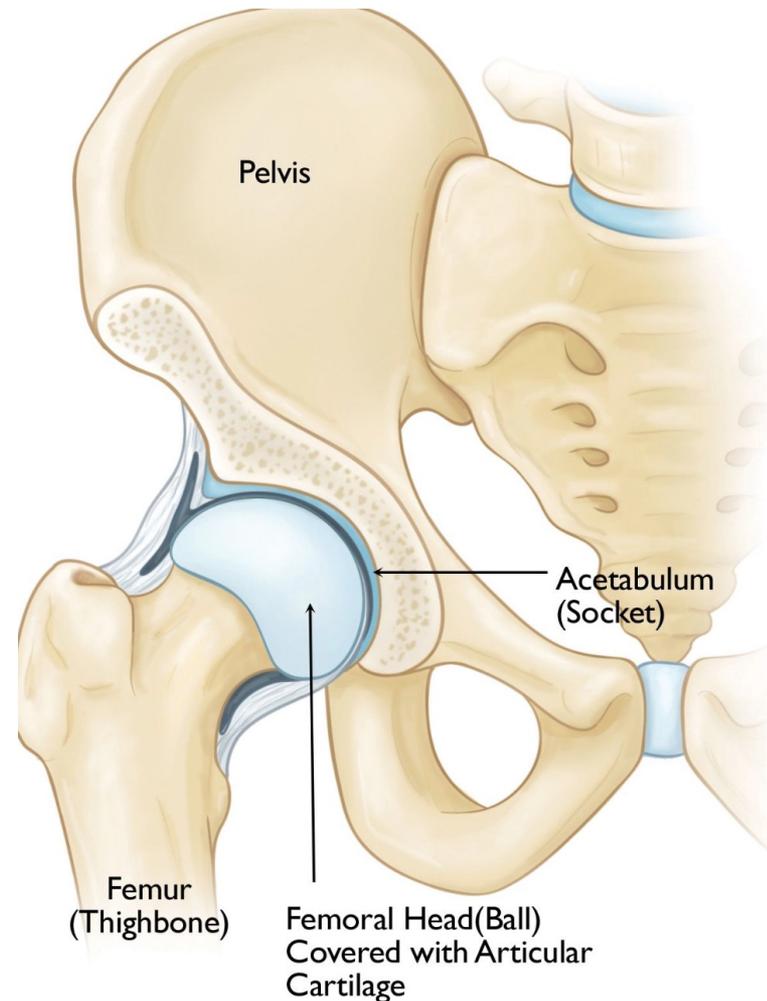
# ANATOMY REVIEW<sup>1,2,3</sup>

## Hip Joint

- **Ball-and-socket**

## Articular Cartilage

## Synovium



The normal anatomy of the hip.

<https://orthoinfo.aaos.org/en/diseases--conditions/osteoarthritis-of-the-hip/>

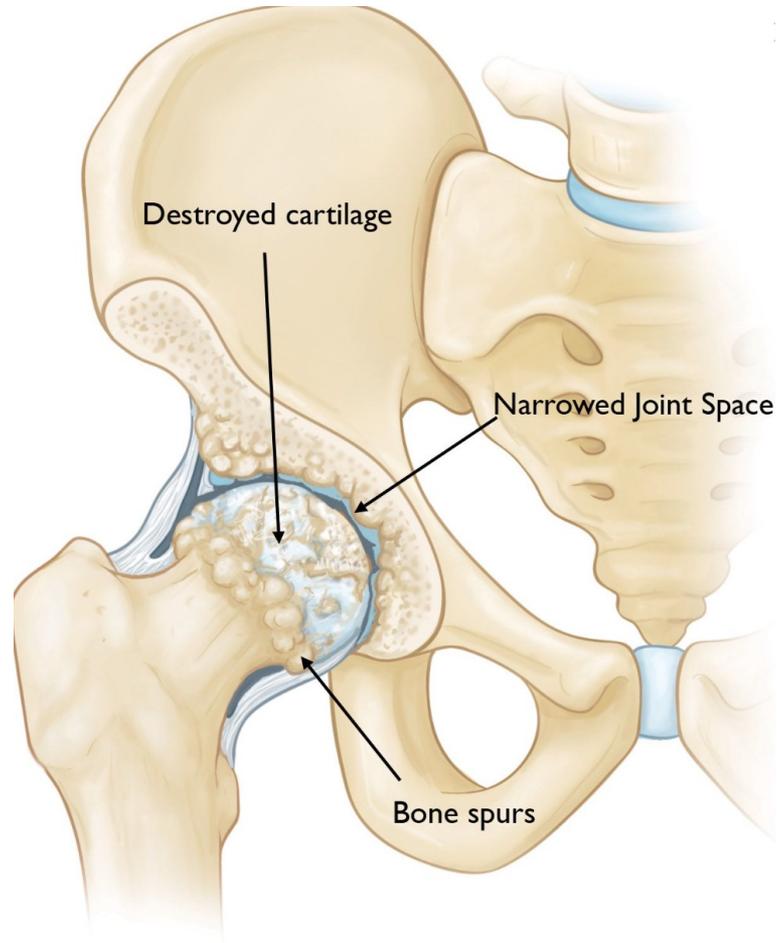
# HIP OSTEOARTHRITIS<sup>1,2,3</sup>

Degenerative

Cartilage Damage

Narrowed Joint Space

Osteophytes

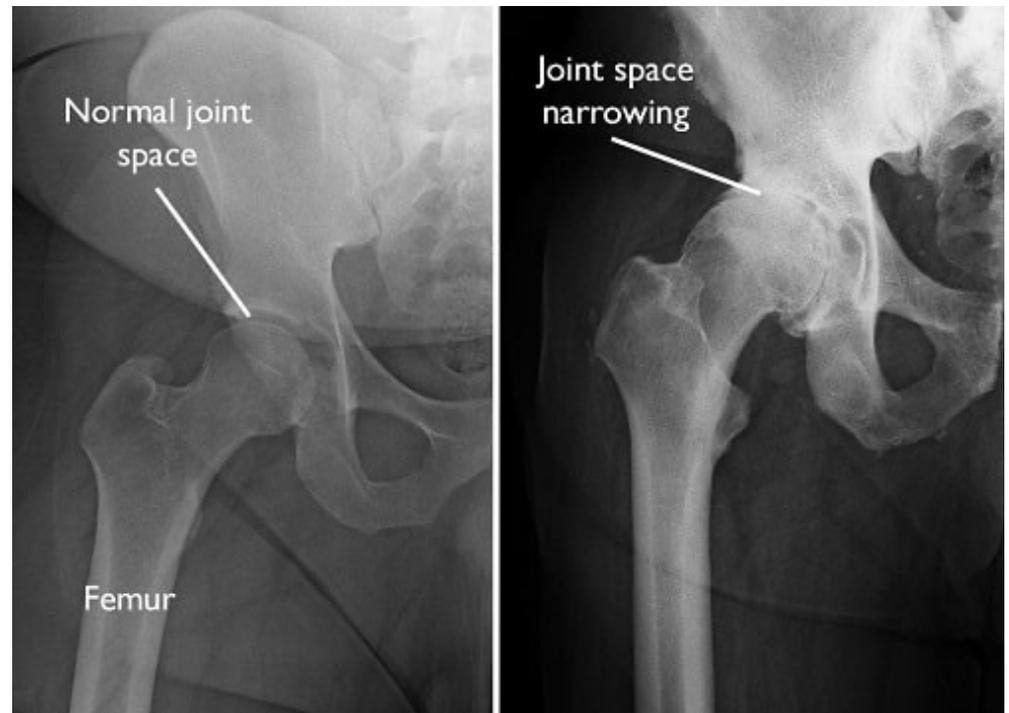


A hip damaged by osteoarthritis.

<https://orthoinfo.aaos.org/en/diseases--conditions/osteoarthritis-of-the-hip/#:~:text=In%20osteoarthritis%2C%20the%20cartilage%20in%20bone%20rubbing%20on%20bone.>

# HIP OSTEOARTHRITIS<sup>1,2,3</sup>

- Affects 10-25% of the population > 55 years old
- Decreased QOL
- Conservative treatment is affective
  - Weight reduction
  - Exercise
  - Manual therapy
- Accurate and early diagnosis
  - X-Ray
  - Clinical Diagnosis



## HIP OA- SUBJECTIVE<sup>1,2</sup>

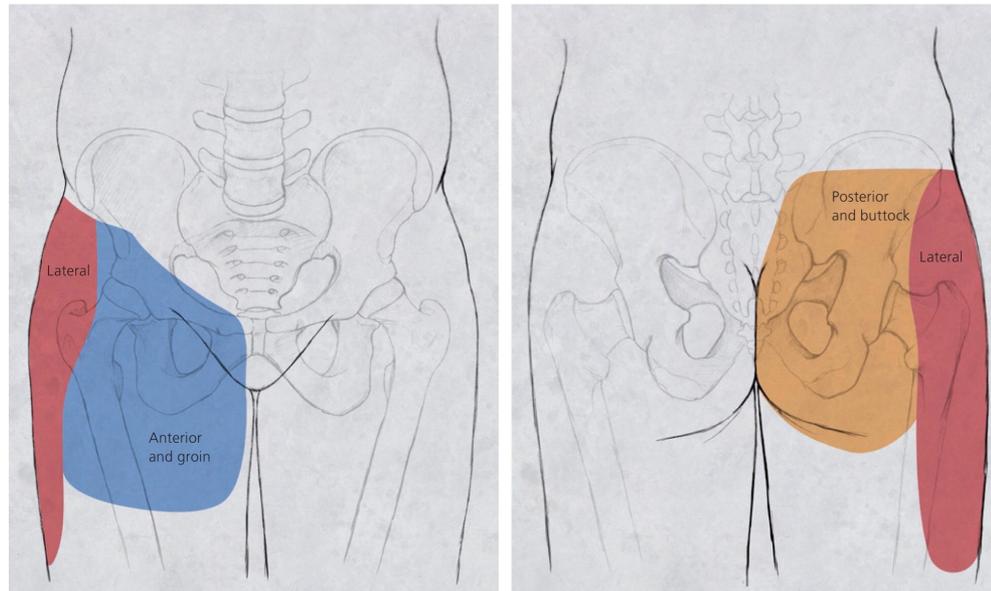
- **Patient population:**
  - > 50 y.o.
  - Congenital hip dysplasia, Legg-Calve Perthes, SCFE, LLD
- **Insidious onset of pain<sup>19</sup>**
- **Pain:**
  - Anterior thigh, groin, lateral hip, lower back, knee
  - Deep, ache
- **Aggs:**
  - Squatting
  - Stiffness or pain with movement after rest lasting < 30 min
  - Increased pain with disuse or vigorous use
  - Ascending stairs
  - Active hip extension

## HIP OA – OBJECTIVE<sup>1,4,5,6</sup>

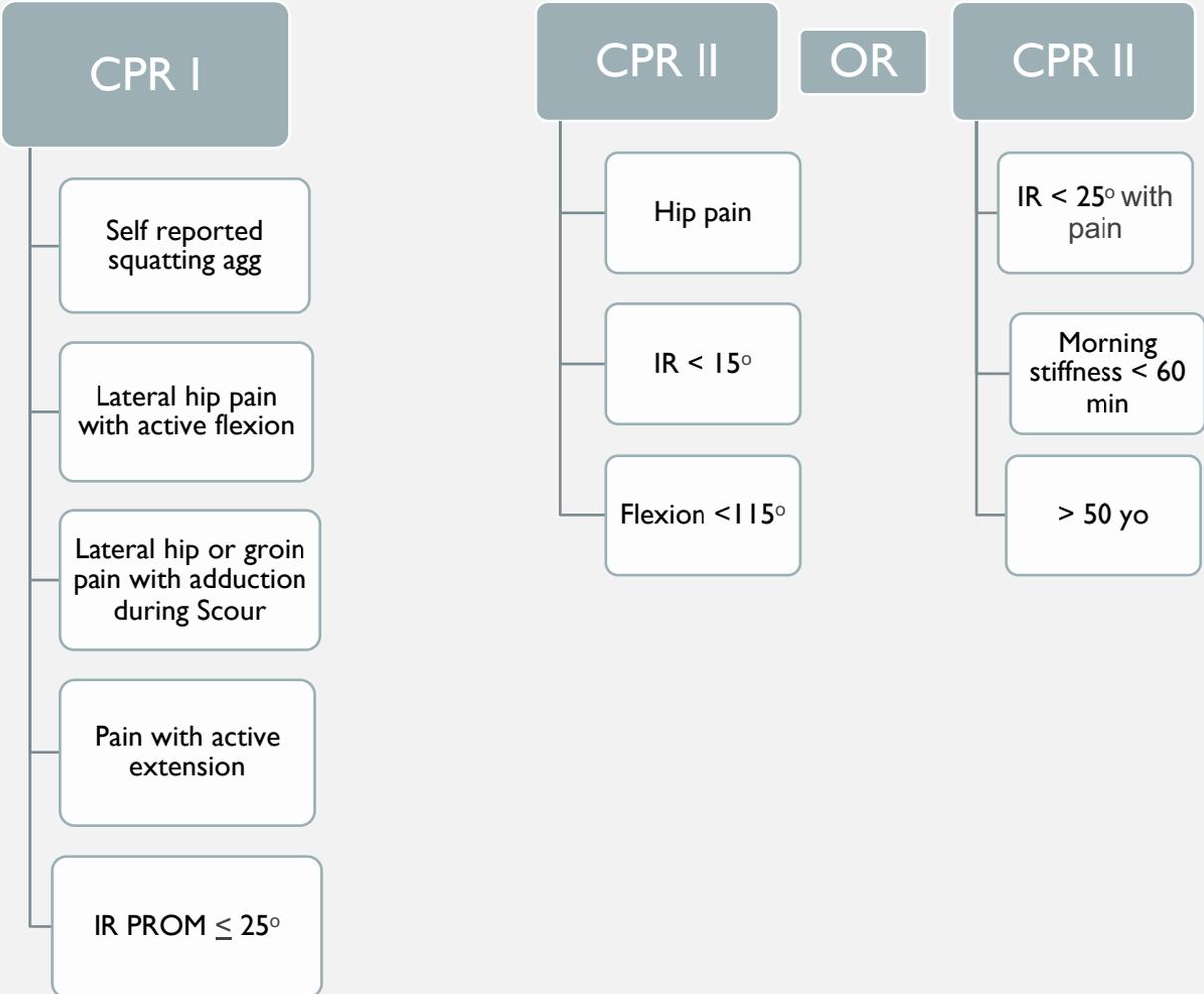
- **PROM and AROM:**
  - Decreased
  - Capsular Pattern
    - IR > Flexion > ABD
  - CPRs
- **Creptus**
- **Special Tests:**
  - FABER
  - FADIR
  - Scour

## DIFFERENTIAL DIAGNOSIS<sup>7</sup>

- Muscle Strain
- Athletic Pubalgia
- Bursitis
- Labral Tear
- Fracture
- Snapping Hip Syndrome
- Sciatica
- Joint Capsule Disorder
- Meralgia Paresthetica
- GTPS



# CLINICAL PREDICTION RULES<sup>1,4</sup>



# WHAT CAN WE DO? 1,7,8,9,10,11,12

- **Patient Education**
  - “Becoming motivated and involved”
- **Strengthening**
  - Strengthen muscles around joint
- **Manual Therapy**
  - Stretching + mobilization and manipulation
  - Thrust, non-thrust or STM
  - Maintain what is gained through manual with exercise

# WHAT CAN WE DO? 1,7,8,9,10,11,12

- **Exercise**

- Aquatic therapy
- Function, gait, balance
- Flexibility, endurance

- **Orthoses/Shoes**

- Malalignment
- Bracing is not the first line of action

- **Assistive Devices**

- Reduce stress on joints
- Increase daily function

- **Modalities**

- Heat and US for pain reduction

# EVIDENCE-BASED TREATMENT<sup>13</sup>

- Abbott et al.
- 206 adults with hip or knee OA
- **Multi-modal exercise:** aerobic, strengthening, stretching, NMSK control
- **Manual:** thrust, non-thrust, stretching, STM + ROM HEP 3x/wk
- **Combined**
- Outcomes: Manual and Exercise both provided performance benefits over usual care; no added benefit from the combination

# EVIDENCE-BASED TREATMENT<sup>9</sup>

- Wei-Heng et al
- PT impact on incidence of THA
- 60-80 year olds who received >24 PT sessions within 1 year of OA diagnosis significantly decreased THA
  - Decrease pain, increase mobility, delay age related changes
- Intervene early!

# EVIDENCE-BASED TREATMENT<sup>15</sup>

- Kloek et al
- Short- and long-term effectiveness of e-exercise compared to in-person PT
- 208 adults with hip/knee OA
- 3-month intervention
  - Graded activity, strength/stability, education
  - 5 online sessions; 12 in person sessions
- **E-exercise group:** increase in PA at 3 months; increase in sedentary behavior at 12 months
- **Outcomes:** decreased pain, decreased tiredness, increased QOL, increased self-efficacy
  - Hip OA outcome score, TUG, SQUASH

## OUTCOME MEASURES<sup>15,16,17,18</sup>

- 6MWT
- 10-meter walk test
- Oxford Hip Score
- 30 sec STS
- Harris Hip Score
- Hip Disability and Osteoarthritis Outcome Score
- Lower Extremity Functional Scale

LAB

- FABER
  - OA, FAI, Labrum, GTPS
- FADIR
  - OA, FAI, Labrum
- Scour
  - OA, labrum
  - Adduction
- Mobilizations

**THANK YOU!**

<https://create.kahoot.it/share/hip-oa-knowledge-check/5bcd00b3-2ecc-49ed-8858-47dd5f9dd2a8>

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