



Personal exercise program

Musculo-skeletal and Pelvic health physiotherapy services
If you wish to provide feedback of our Service please use this web link.



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To contact us:

Call: 0300 555 0123

e-mail: s1.dynamichealth@nhs.net

Training start date 23/01/2025

Greater Trochanteric Pain Syndrome (GTPS)

What is GTPS?

GTPS describes pain at the side of the hip, often felt on side-lying or when climbing stairs, which originates in the soft-tissues of the hip including muscles, tendons and bursa (see overleaf). A bursa is a small fluid-filled sac that allows tendons to glide over bone. In the majority of cases, pain is associated with a tendon (a tendinopathy) associated with the gluteus medius and/or gluteus minimus muscles, and is usually a consequence of overloading these muscles and/or compression of their tendons in certain postures. This condition can occasionally be accompanied by an inflamed bursa (a bursitis). Tendons can be overloaded either with a significant change in physical activity (type or volume) or with a loss of strength in these muscles.

How is GTPS managed?

Exercises that target the strengthening of these muscles, together with avoiding stretches and provocative postures (in standing, lying or sitting) that place the tendons under compression have proven effective in improving symptoms within 8-10 weeks.

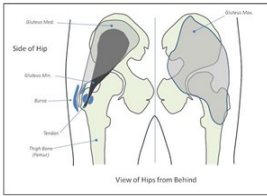
Postural Advice

Avoid any position that allows your affected leg to cross the centre-line of your body. For example, do not sit with crossed-legs or stand with crossed ankles. If you prefer to sleep on your side, place a pillow between your knees. Postures to avoid are illustrated overleaf.

Exercises

Exercises have been individually selected for you – please see overleaf. In order to continue to develop your strength, expect to progress through more demanding exercises as your strength improves.

(Supporting Evidence Based Review completed June 2020)



Anatomy of the hip showing *Gluteus Medius*, *Gluteus Minimus* and *Bursa* at the lateral (side) of the hip. These tissues are usually responsible for pain with GTPS.

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Postural Advice

Avoid standing in this posture; stand with knees straight, with weight equally distributed across both feet.

©PhysioTools



Postural Advice

Avoid standing in this posture; stand with knees straight, with weight equally distributed across both feet.

©PhysioTools



Postural Advice

Avoid standing in this posture; stand with knees straight, with weight equally distributed across both feet.

©PhysioTools



Postural Advice

Avoid sitting in this position; sit with knees bent, both feet placed on the floor with weight equally distributed across both feet.

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Avoid Stretches

Do not perform this or similar hip stretches until your symptoms have fully resolved.

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Sleeping Position

Avoid sleeping in this position. If you prefer to sleep on your side, lie on your symptom-free hip, bend both knees and place a pillow between your knees.

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Recommended sleeping position.

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Isometric Hip Abduction

Stand tall, sideways close to a wall with one knee bent and supported against the wall.

Press the knee against the wall while keeping the hip, knee and 2nd toe of the leg you are standing on aligned. Don't let the knee of the leg you are standing on rotate inwards. Hold for 45 seconds.

©Physiotools

Sets _____

Repetitions _____ /set

Daily 1 times



©Physiotools

Sit. Tie an exercise band around your thighs.

Squeeze your buttocks and move your thighs out against the band. Hold for 45 seconds.

Sets _____

Repetitions _____ /set

Daily 1 times



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Hip Abduction in Standing

Stand tall and take support if needed.

Lift your leg sideways and bring it back, keeping your trunk straight throughout the exercise.

Sets _____

Repetitions _____ /set

Daily 1 times



©Physiotools

Lie on your side with your knees bent. Tighten your pelvic floor muscles and gently pull your lower stomach in.

Lift your top knee as far as you can, without letting your pelvis rotate forward or back. Keep your feet together during the exercise.

Sets _____

Repetitions _____ /set

Daily 1 times



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Sidelying. Keep the leg on the bed bent and the upper leg straight.

Lift the upper leg straight up with ankle flexed and the heel leading the movement.

Option (a) Hold for 45s

Option (b) Slowly raise and lower leg

Option (c) Add resistance band around thighs to either (a) or (b)

Sets _____

Repetitions _____ /set

Daily 1 times



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Lateral Slide Lunge

Stand tall with a towel under one foot.

Squat down with one leg and at the same time slide the other leg with the towel sideways. Pull the leg back next to the other leg and straighten back to the starting position.

(The sliding leg is your symptomatic hip leg).

Sets _____

Repetitions _____ /set

Daily 1 times



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Bridge

Lying on your back with knees bent and feet on the floor.

Lift your pelvis and lower back (gradually vertebra by vertebra) off the floor. Hold the position for 5s, lower down slowly returning to starting position.

Once this is no longer challenging, progress to the version below.

Sets _____

Repetitions _____ /set

Daily _____ times



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Single Leg Bridge

Lying on your back with knees bent.

Lift your hips up and keep them straight while shifting the weight over to one leg. Then straighten the other leg - put it back down and repeat with the other leg.

Sets _____

Repetitions _____ /set

Daily 1 times



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Stand in front of a table or chair holding on to the support with both hands.

Slowly crouch keeping your back straight and heels on the floor. Stay down for approx. 20 secs. and feel the stretching in your buttocks and the front of your thighs.

Sets _____

Repetitions _____ /set

Daily 1 times



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Sit with your hands on your shoulders.

Stand up and then slowly sit down on the chair. The exercise can be made easier or more difficult by changing the height of the chair. Do not let your knees turn in or out.

Sets _____

Repetitions _____ /set

Daily 1 times



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Stand leaning with your back against a wall and your feet about 20 cm from the wall.

Slowly slide down the wall until your hips and knees are at right angles. Return to starting position.

Sets _____

Repetitions _____ /set

Daily 1 times



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Squat

Stand tall with feet slightly wider than hip-width apart. Toes pointing forward or turned a few degrees outwards. Keep your chest up and your spine and neck in a neutral position.

Squat down by sitting back and bring your arms forward. Push back up through the heels, chest up, and straighten your hips.

Note:

- Keep your hips, knees and toes aligned and don't let your lower back round.
- Keep your weight evenly on your whole foot.

Sets _____

Repetitions _____ /set

Daily 1 times



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Sumo Squat

Stand tall with your feet wide apart. Trunk is active and buttocks tightened. Hold a weight with straight arms in front of your body.

Squat down keeping most of your weight on your heels. Keep your spine in a neutral position and your trunk upright. Push back to the starting position.

Note:

- Push your knees outwards, to keep your knees and toes aligned.
- Weight evenly distributed between the heels and forefeet.

Sets _____

Repetitions _____ /set

Daily 1 times



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Squat, Alignment

Stand with feet hip-width apart and an exercise band placed around your legs just above or under your knees with the slack taken off the band.

Squat down by moving your pelvis backwards and bending your knees. Actively push your knees against the band to keep hips, knees and toes aligned.

Sets _____

Repetitions _____ /set

Daily 1 times



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Glute Walk

Stand tall, with an exercise or loop band around your legs (slightly above or under the knee joint).

Take a hip-width stance so that the band tightens and squat down. In this position, step to the side then return, keeping the band tight at all times.

Note:

Focus on using your buttock muscles.

You can also step forwards and backwards, but remember to keep feet at least hip width apart.

Sets _____

Repetitions _____ /set

Daily 1 times



Stand sideways on a step with one foot hanging over the edge of the step.

Slowly bend your knee allowing your other foot to brush the floor.

Sets _____

Repetitions _____ /set

Daily 1 times