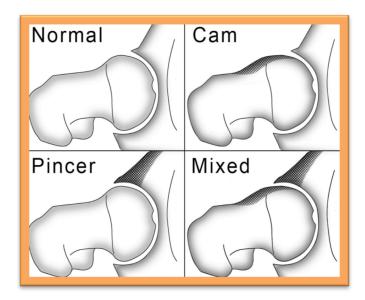


## FEMORAL-ACETABULAR IMPINGEMENT

### WHAT IS FEMORAL-ACETABULAR IMPINGEMENT (FAI):

FAI is a condition where the femoral head (top of the long thigh bone) or the socket (acetabulum) are abnormal. This results in the progressive injury to the cartilage. With the abnormal shaping of the hip joint, the thigh bone compresses against the socket causing damage. This compressive force leads to premature osteoarthritic changes in the hip joint.



#### **CAUSES OF FAI:**

Some possible causes of FAI include:

- > Congenital abnormalities
- Excessive sport
- Poor hip stability
- > Excessive hip muscle tightness

#### **DIAGNOSIS:**

A thorough subjective examination will look at the current history of the condition including aggravating and easing factors, mechanism of injury, previous hip pathology, training regime and more.

Those with FAI will often report tightness and pain through the front of the hip on bending activities such squatting. Objective as examination may show and increased curve of the lower back, jamming pain when the therapist moves the knee towards the chest and some decreased of motion. did range physiotherapist may refer you on for further examination with a scan e.g. X-ray or MRI.

#### PROGNOSIS/TIMELINES:

Post surgical recovery is usually about 3-4 months before return to sport. No operative treatment often involves activity modification, as bony changes can't be changed.

#### SIGNS AND SYMPTOMS:

- ➤ Hip pain and discomfort
- > Jamming sensation through the hip when bringing the knee to chest
- Muscles tightness through the front of the hip
- > Decreased hip range of motion
- Associated injuries including groin strain or osteitis pubis
- Discomfort with deep bending activities



# FEMORAL-ACETABULAR IMPINGEMENT

#### **COMPLICATIONS:**

Due to the fact there are bony changes, surgical intervention in often required. There are different kinds of surgeries depending on the presentation and scan findings. These may include arthroscopies and osteotomy. Please see a recommended surgeon for further opinion.



### PHYSIOTHERAPY TREATMENT OPTIONS:

- Deep tissue massage
- Exercise reduction advice and cross training programs
- > Active release techniques
- > Gluteal and trunk strengthening programs
- Dry needling
- > Education
- > Pain relief strategies
- > Biomechanical modifications
- > Stretching programs
- > Joint mobilisation and manipulation