



Labral Tears of the Hip

BY: JON HYMAN, MD



Jon Hyman, MD, is a board certified Orthopaedic Surgeon, Sports Medicine specialist, in Atlanta, Georgia (GA). His practice encompasses all aspects of sports medicine care, with emphasis on the knee, hip, elbow and shoulder arthroscopy.

As we strive to maintain active, healthy lifestyles, sometimes we are beset with pain. One of our more vulnerable areas is the hip joint. If you've ever experienced hip pain, you may have been feeling symptoms of bursitis, tendonitis, muscle strain or the dreaded "labral tear."

Labral tears in the hip are common. They often occur without our awareness and may be present without symptoms of pain. Not all labral tears require treatment however, so if you are found to have a labral tear, make sure you discuss it with a specialist before embarking on expensive or risky therapies to try to get rid of it.

The labrum is a cartilage ring around the rim of our hip socket (acetabulum). It is thin and can be damaged suddenly by a fast movement such as in sports or an accident. It can also be gradually worn down over time as a result of recurrent episodes of prolonged compression, such as in yoga, labor in childbirth, intimacy, cycling or bone impingement. Arthritis and general age-related deterioration is another common cause of labral tearing.


People with labral tears may have no pain, or they may notice stiffness, weakness or a general loss of flexibility about the hip. In most cases of symptomatic labral tears, the pain will be in the front of the upper thigh, near the hip crease or groin, where the leg attaches to the torso. The pain can also be located on the side of the hip, buttock or deep inside the hip area.

When a patient has hip pain that doesn't respond to rest, activity modification, or perhaps a short course of anti-inflammatory medication, an evaluation by a healthcare provider is appropriate. Physical therapy to strengthen muscles around the hip, lower back and abdomen can be very useful in some cases. However, since therapeutic exercise

may be ineffective or aggravate a labral tear, it's often useful to investigate the pain with a medical examination, possibly x-rays and an MRI. The MRI used to evaluate a labral tear is not a standard MRI. A high resolution MRI study or arthrogram, focused specifically on the hip, is most likely to be accurate in diagnosis.

If a thorough medical evaluation shows no signs that a patient is causing themselves harm by working through the pain of a labral tear, then rehabilitation therapy and temporarily altering lifestyle activities is reasonable. If, however, these interventions don't help or if the medical evaluation shows other concerning factors, such as the shape of the bones or signs of damage, then more specialized hip care may be necessary.

Ultrasound or x-ray guided injections can be useful in diagnosing and treating labral tears in the hip. These specialized techniques can be done in the office or on an out-patient basis for the overwhelming majority of patients. In the cases which are more severe or do not respond to non-surgical therapies, hip arthroscopy surgery should be considered.

Arthroscopic surgery of the hip is a highly technical and subspecialized area of orthopedic surgery. It requires the use of special equipment and skills that are not commonly available in most surgical practices or facilities. While the procedure is being done with increasing frequency, we are also seeing increases in the numbers of complications. A successful hip arthroscopy and repair of a torn labrum can usually be performed with two tiny punctures, in under an hour and is done on an outpatient basis. The overwhelming majority of patients with a repaired labral tear can return to sports, work, and regular lifestyle activities with a few months of post-surgery rehabilitation. 

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