

Hip Abductor Repair

Physical Therapy Protocol

Partial or Full Thickness Gluteus Medius Repair with or without Labral Repair

General Guidelines/Precautions following surgery

-Weight bearing: Partial-thickness tear: 2 crutches, 20 pounds weight bearing for the first 6 weeks postoperatively

Full-thickness tear: 2 crutches, 20 pounds weight bearing for the first 8 weeks postoperatively

-ROM: **NO Active** hip abduction and IR and **NO Passive** hip ER and adduction for the first 6 weeks postoperatively

-Do not push through pain or pinching, gentle stretching will gain more ROM.

-Use Continuous Passive Motion (CPM) 4 hours/day or stationary bike on zero resistance 2 hours/day **ONLY** for patients who have also had an arthroscopic procedure inside the hip joint

-Manage scarring around portal sites

-General precautions: Hip flexor tendonitis, Trochanteric bursitis, synovitis, scar tissue around portals

-Therapy should begin 1 time per week for first 6 weeks then 2-3 times per weeks after discharged from brace and crutches at 6 weeks PO.

Weeks 6-8

- CPM for 4 hours/day or upright bike (no resistance) for 2 hours/day for patients who have had gluteus medius repair AND arthroscopy inside the hip joint
- ROM: **PROM hip IR; AAROM: hip ER, abduction, adduction; AROM: hip flexion, extension**
- Upright bike: NO RESISTANCE (must be painfree, begin ½ circles, progress to full circles)
- Soft tissue mobilization: Gentle to scar and hip flexor, ITB
- Gait training: Weight bearing as tolerated for partial-thickness gluteus medius tears
20 pound weight bearing for full-thickness gluteus medius tears
- Strength:
 - Hip isometrics
(Begin at 6 weeks): extension, adduction
(Begin at 8 weeks): sub max pain free hip flexion
- Quad sets, Hamstring sets, Lower abdominal activation
- Modalities for pain control, swelling

Weeks 8-10

- Continue with previous exercises
- Gait training: Weight bearing as tolerated, work on symmetry
- ROM: **progress A/PROM in all directions**
- Upright bike: progress resistance as tolerated
- Soft tissue massage: PRN (scar, iliopsoas, TFL, ITB, piriformis, QL, lumbar paraspinals, hip adductors)
- Strength
 - Hip abduction: Isometrics to isotonic (see addendum for progression)
 - Progress isometric resistance
 - Quad and hamstring isotonic exercise
 - Quadruped rocking
- Stretching
 - Manual hip flexor stretching (gentle, no pain)
 - Modified Thomas position, or pillows under buttock
 - Modalities for pain control, swelling

Weeks 10-12

- Gait: Work on symmetry
- Continue with previous exercises
- ROM: progress A/PROM in all directions
- Soft tissue massage: PRN (scar, iliopsoas, TFL, ITB, piriformis, QL, paraspinals, hip adductors, gluteus medius)

Weeks 10-12 continued:

- Strength
 - Progress core strengthening
 - Initiate hip flexion and extension strengthening progression (see addendum)
 - Hip IR/ER using stool under knee (make sure to hold onto object for support).

- Upright bike with resistance
- Begin Elliptical training
- Stretching: Manual and self hip flexor stretching
- Modalities for pain control, swelling

Weeks 12-14

- Gait: Normalize without AD
- ROM: progress A/PROM all directions
- Soft tissue massage: PRN (scar, iliopsoas, TFL, ITB, piriformis, QL, paraspinals, hip adductors, gluteus medius)
- Strength
 - Progress LE and core strength and endurance as able
 - Begin proprioception/balance activity (2 legs to 1 leg, stable to unstable)
 - Begin closed chain strengthening such as leg press
 - Side stepping with theraband
 - Single leg squats, step-ups, lunges
- Stretching: Manual and self hip flexor stretching
- Modalities for pain control, swelling

Weeks 14-16

- Gait: Normalize without AD
- ROM: progress A/PROM all directions
- Soft tissue massage: PRN (scar, iliopsoas, TFL, ITB, piriformis, QL, paraspinals, hip adductors, gluteus medius)
- Strength:
 - Progress LE and core strengthening
 - Increased emphasis on single leg strength moves
 - Unilateral leg press, hip hikes, eccentric step downs
- Progress balance and proprioception
- Stretching: Manual and self (hip flexor, hip adductors, glute, piriformis, TFL, ITB)

Weeks 16-18 (Advanced Rehabilitation)

Criteria for progression to this level

- Full ROM
- Painfree, normal gait pattern
- Hip flexor strength 4/5 or better
- Hip abd, add, ext and IR/ER strength of 4+/5 or better
- Strength:
 - Progress core, hip, LE strength and endurance
 - Lunges (multi angle)
- Plyometric progression (Must have good control with all exercises first)
- Forward/Backward running program (Must have good control with all exercises first)
- Agility drills (Must have good control with all exercises first)
- Stretching: Progress self and manual stretches
- PRECAUTIONS No contact activities until cleared by MD
- No forced (aggressive) stretching