

Patient information leaflet for- Anterior Hip pain/Femoroacetabular impingement

What's wrong with me?/What is FAI-

Femoroacetabular impingement (FAI) is a condition in which there is abnormal contact (impingement) between the rim of the acetabulum (hip joint socket) and femoral head-neck junction (the bone just below the ball part of the thigh bone), on movement of the hip.

Hip impingement pain is typically experienced in the groin, but patients might also complain of discomfort around the thigh or the buttock. Pain is often described as dull or aching in nature and might become worse after prolonged periods of sitting. Occasionally, an exacerbation of sharp and catching pain with activity is reported.

Certain activities, particularly those which involve hip flexion (e.g. football, dancing, ballet, and aerobics) will make the pain worse. Patients often find that sitting for a prolonged period of time, e.g. a long car journey, will bring on groin pain and they often struggle to move into a more comfortable position.

How long will it take to get better?

Generally symptoms which have started suddenly will take 6-8 weeks to settle down. Symptoms which are of gradual onset can take longer, sometime some months. Occasionally hip impingement will be an on-going problem.

What can I do to help myself?

Try and keep yourself generally fit and active.

Things which should help to manage the pain, include activity modification or avoidance of exacerbating activities, rest, and anti-inflammatory medication (assuming no contraindications exist)

Generally impacted exercises such as running, Zumba, and breast stroke swimming should be avoided if they exacerbate your symptoms.

How is FAI treated?

There are a number of treatments available, some are non – surgical, others surgical.

- 1) Nothing / Analgesia. Anti-inflammatories can be taken just before you perform an activity that brings on your hip pain so that it reduces pain and inflammation.
- 2) Activity modification. This involves avoiding activities that cause your symptoms and may involve avoiding particular sporting activity or changing your daily routine.
- 3) Physiotherapy. This can help to strengthen muscles around the joint and improve the range of motion

- 4) Injection. This accomplishes two things; if the pain is a result of FAI and originating from the hip joint it can provide pain relief. If successful it also rules out pain originating from the back, or any other potential source around the hip area.
- 5) Hip Joint arthroscopy (key hole surgery) is indicated in some cases. This is normally when there is no osteoarthritis present in the joint.
- 6) Arthroplasty. This refers to joint replacement and can take the form of re-surfacing arthroplasty or total hip replacement. Arthroplasty is normally carried out if there is significant osteoarthritis in the hip.