

LATERAL HIP PAIN

Physiotherapy Guide & Progressive Loading



◆ INTRODUCTION

If you are reading this guide, you are probably experiencing pain on the outer side of your hip that is limiting your daily activities, rest, or training.

The first thing we want to tell you is this:

👉 **you are not alone, and this is a very common condition.**

Terms such as:

- hip bursitis
- trochanteric bursitis
- gluteal tendinopathy

are often used as if they meant exactly the same thing.

👉 Although these problems are closely related, there is a small difference.

Hip bursitis mainly refers to irritation of the trochanteric bursa, a small fluid-filled structure whose role is to reduce friction between the tissues around the hip.

On the other hand, in many cases there may also be overload or irritation of the **gluteal tendons, especially the gluteus medius**, which helps stabilize the pelvis during activities such as walking, climbing stairs, or standing on one leg.

👉 In practice, these structures often work together, and symptoms frequently overlap.

For this reason, this protocol has been designed to help with conditions related to:

- lateral hip pain
- trochanteric bursitis
- trochanteric pain syndrome
- gluteal overload
- irritation of the lateral hip tissues

Although it can be painful and sometimes persistent, in most cases this is not a serious injury, but rather a condition related to the load capacity and adaptability of the tissues.

This guide has been created to help you begin a simple, progressive, and safe physiotherapy process.

◆ UNDERSTANDING THE PROBLEM

Hip bursitis is related to irritation of the trochanteric bursa, although in many cases gluteal tendinopathy is also present (especially involving the gluteus medius).

These tissues constantly work during:

- walking
- single-leg support
- climbing stairs
- maintaining pelvic stability

When the load exceeds the tissue's ability to adapt, symptoms may appear such as:

- pain on the outer side of the hip
- discomfort when lying on the affected side
- pain while walking or standing for long periods

👉 **This does not necessarily mean the tissue is damaged**, but rather irritated and in need of proper load management and progressive exercise.

◆ IMPORTANT CONCEPT

One of the most common mistakes is:

- ✗ completely stopping activity
- ✗ or continuing to ignore the pain

👉 The correct approach is:

- load management
- gradual progression
- specific exercises

👉 This allows the tissues to gradually adapt and improve over time.

◆ HOW TO USE THIS PROGRAM

👉 This is **NOT** a random set of exercises.

This is a physiotherapy-based protocol designed to:

- reduce pain
- improve the hip's load capacity
- restore strength and control

Perform the exercises calmly, without forcing the movement, and always maintaining proper control.

EXERCISES

◆ FREQUENCY

- 2–3 times per week for about one month
- slow and controlled execution
- consistency is key 

♦ WHAT YOU MAY FEEL

During the exercises, or in the days after the exercises, you may notice:

- mild discomfort
- a feeling of tension

👉 This is normal.

⚠️ Avoid intense or sharp pain by reducing the load if necessary.

♦ WHAT TO EXPECT

Improvement is not immediate.

It requires:

- time
- repetition
- progression

👉 With consistency, in most cases the pain will progressively improve. From the first month, you should notice a gradual reduction in pain intensity — not necessarily complete disappearance, but a clear improvement over time 

👉 LET'S BEGIN...

1 ABDUCTOR ISOMETRIC HOLD (SIDE-LYING POSITION)



Position:

Lie on your NON-painful side. Raise the upper leg until you feel slight discomfort. Keep the upper leg slightly elevated in that position.

Execution:

Hold the leg elevated without moving for **20–40 seconds**.

Sets:

3–5 sets

Why is it important?

This exercise helps reduce pain and activate the lateral hip muscles without overloading them, using a safe contraction such as an isometric hold.

What should you notice?

During the isometric contraction, or in the days following the exercise, you should notice that the pain gradually decreases and/or that your range of motion improves.

2 CONTROLLED HIP ABDUCTION WITH ECCENTRIC PHASE



What does “eccentric phase” mean?

The **eccentric** phase is the part of the movement in which the muscle works while lengthening.

In this exercise, the most important part is the lowering phase of the leg: you should not let it drop, but instead control it slowly.

This helps improve gluteus medius control and the load tolerance of the lateral hip tissues.

Position

Lie on your side on the non-painful side, keeping your body aligned.

The upper leg will be the working leg.

You can perform the exercise:

- without weight at the beginning
 - or with a small ankle weight when the movement becomes well tolerated
-

Execution

Slowly raise the upper leg while keeping the pelvis stable.

Then lower the leg even more slowly and in a controlled way over approximately 5 seconds.

- 👉 The lowering phase is the eccentric part of the exercise.
 - 👉 Do not let the leg drop.
 - 👉 Avoid rotating the foot upward.
 - 👉 Avoid compensating by leaning the trunk or moving the pelvis.
-

Sets

2–3 sets of 10–12 repetitions

Why is it important?

This exercise strengthens the gluteus medius, improves pelvic control, and helps progressively increase the load capacity of the lateral hip tissues.

The eccentric phase allows for a more controlled and specific type of loading, which is especially useful in conditions related to tendon overload or lateral hip pain.

3 HIP HIKE (PELVIC CONTROL ON STEP) 💣

<https://youtube.com/shorts/HOWTeKYXfxs>

Position:

Stand on a step with the affected leg supported.
The other leg remains suspended in the air.

Execution:

Slowly let the pelvis on the free side drop downward, using the other leg to lightly touch the floor with the foot as a stopping reference.

Then activate the hip muscles to raise the pelvis back to a level position.

👉 If the exercise causes only mild discomfort, that is acceptable. If the pain is too strong, reduce the amount of knee flexion and movement amplitude.

👉 Slow and controlled movement

👉 Do not use the trunk to compensate

Sets:

2–3 sets of 8–12 repetitions

Why is it important?

This exercise improves pelvic control under load and reproduces real-life situations such as walking, climbing stairs, and standing on one leg.

4 GLUTE BRIDGE (DOUBLE-LEG AND SINGLE-LEG VARIATION)



Position:

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

(Progression: one-leg variation with one foot supported and the other leg lifted in the air.)

Execution:

Lift your pelvis while maintaining control, hold the position for 2–3 seconds, and then lower yourself slowly.

Sets:

2–3 sets of 10–12 repetitions

Why is it important?

This exercise activates the gluteus maximus and helps reduce excessive load on the lateral side of the hip.

5 STANDING HIP ABDUCTION (WITH ELASTIC BAND)



Position:

Stand upright with an elastic band around your ankles while lightly supported against a wall.

Execution:

Move the leg slowly out to the side and return in a controlled manner.

- 👉 Keep the pelvis stable
 - 👉 Avoid leaning the body sideways
-

Sets:

2–3 sets of 10–12 repetitions

Why is it important?

This exercise works the hip muscles under load and improves stability during daily activities.

◆ IMPORTANT NOTE

👉 Some exercises such as hip external rotation movements and stretching of the hip tendons may be useful in more advanced phases. However, in this initial stage, it is more important to focus on movement control and gradual progression of abduction loading.

👉 In addition, it is important to avoid positions that increase lateral hip compression, such as crossing the legs or sleeping on the painful side.

👉 In some cases, gentle self-massage over the lateral side of the hip or local heat application may help promote muscle relaxation and improve comfort.

◆ FINAL MESSAGE

If you have made it this far, you have already taken an important step:

👉 **you are starting to actively take care of your problem.**

Remember:

- there is no need to rush
- there is no need to force painful movements
- the body adapts over time

👉 In most cases, with the right approach, improvement will come.

👉 Consistency and proper execution are key to achieving results.

If you do not notice improvement after approximately one month, it may be useful to undergo a more complete evaluation to rule out other conditions.

In some cases, additional treatments such as shockwave therapy may be recommended.

👉 We recommend consulting a specialist or physiotherapist.

◆ SUPPORT

If you have any questions or need support:

✉ support@physiocarehub.eu

👉 You do not have to go through this alone.
We are here to help you.

Antonio

