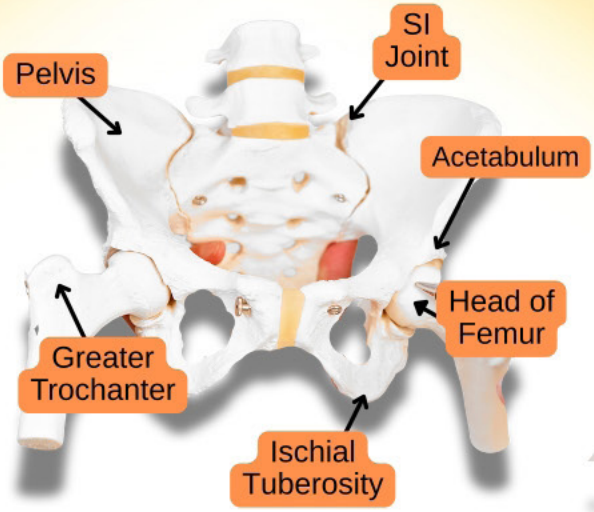
WILLIAMS INTEGRACARE CLINIC

PHYSICAL THERAPY & HIP HEALTH

THE HIP IS THE LARGEST JOINT IN THE BODY!

NO GLUTES, NO GLORY!!!

Strong glutes contribute to improved function and greater protection of the hip joints, promoting better function of your entire body.



The hip joint is a complex joint that thrives off of direct hip, pelvis and core stability.

- The hip joint is a ball and socket joint, made up of the acetabulum (socket), and head of the femur (ball).
- The acetabulum is lined with a fibrous layer of cartilage, called the labrum.
- The ball and socket mechanics allow 360° of movement, making proper support for that level of range of motion critical to pain free function.

HIP MUSCLE GROUPS

HIP EXTENSORS	HIP FLEXORS
Includes the gluteus maximus—one of the primary hip stabilizers and main buttock muscles. These muscles play a key role in stabilizing the hip and entire trunk. They are a major component of the posterior chain of movement.	Located on the front of the hip, including the iliacus and psoas major muscles. Often underactive or weaker and part of the anterior chain of movement.
ABDUCTORS	**ADDUCTORS**
Includes the gluteus medius, located on the lateral (side) of the hip. Critical for overall hip stability and control during lateral movements.	Inner thigh muscles essential for hip and pelvic stability.
EXTERNAL ROTATORS	**INTERNAL ROTATORS**
Rotate the lower extremity outward	Rotate the lower extremity inward

Rotators are important for deep hip stability.

Strengthening in 360° around the hips is essential, but equal attention should be given to achieving that same degree of stability throughout the entire pelvis. Multidirectional abdominal strengthening is a critical component of balanced hip and pelvic stability.

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PHYSICAL THERAPY & HIP HEALTH

EVERYTHING IS CONNECTED

Core strengthening provides foundational support and plays a key role in improving hip function. Hip flexor strength is closely tied to core strength and often requires targeted strengthening.

Your physical therapy team can assess and guide appropriate intervention.

HIP TIGHTNESS & STIFFNESS

A common complaint related to the hip joint is a feeling of tightness or stiffness. This is often not just a flexibility issue but can be a sign of underlying weakness. When the muscles surrounding the hips lack strength and stability, the nervous system may respond by increasing muscle tension as a protective mechanism. While stretching can offer short-term relief, long-term improvement typically requires targeted strengthening to address the root cause and restore proper movement patterns.

COMMON HIP DIAGNOSES

HIP ARTHRITIS

- Occurs when cartilage wears down in the joint, leading to pain, stiffness, and reduced mobility—often felt in the hip, groin, thigh, or buttock. Strengthening the hips can help reduce symptoms, slow progression, or even prevent arthritis altogether.

GREATER TROCHANTERIC PAIN SYNDROME

- Typically involves pain on the outer region of the hip, and can radiate down the thigh at times. Often linked to weakness in the abdominals, posterior chain, and glute muscles.
- Often involves **bursitis** and/or **tendinitis.**

LABRAL TEAR

- The labrum deepens the hip socket for added stability. A tear can cause pain, clicking, locking, and reduced range of motion.

FAI (Femoral Acetabular Impingement)

- This occurs when the bones of the hip rub against each other. This can involve the head of the femur (ball) having bony overgrowth that leads to pinching, and/or the acetabulum (socket) having bony overgrowth that leads to pinching; or both can occur together.

SINGLE LEG STRENGTH & STABILITY

Single-leg strength and stability are very important factors for hip function. Since 80% of walking involves single-leg support, greater strength and stability in each leg—from core to foot—promote better movement and overall well-being.

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