A Hip Solution: Chronic Hip Impingement Treated with Intra-articular and TFL Tendon Prolotherapy

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Case History

- 39 year old male evaluated in musculoskeletal clinic
- Chief complaint:
  - **Recurring sharp, aching right hip pain**
    - **6-8/10 pain**
    - **Ongoing 7-8 yrs**
    - Localized to medial groin
  - Exacerbated by ambulation, internal and external hip rotation
  - Mild relief with compression, elevation, NSAIDs

Initial Physical Exam

Pertinent Exam Findings:

SKIN: No erythema, edema, or warmth to RLE

EXT (RLE): tenderness to palpation over the right tensor fascia lata (TFL) and iliopsoas

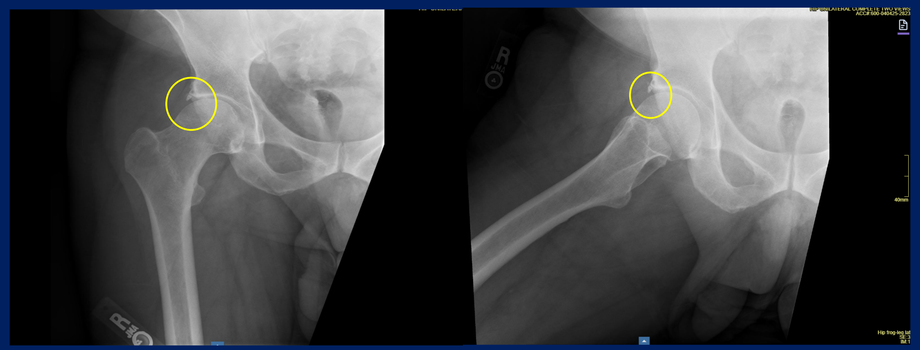
SPECIAL TESTS: Positive FADIR, FABER, and hip scour

Clinical Course

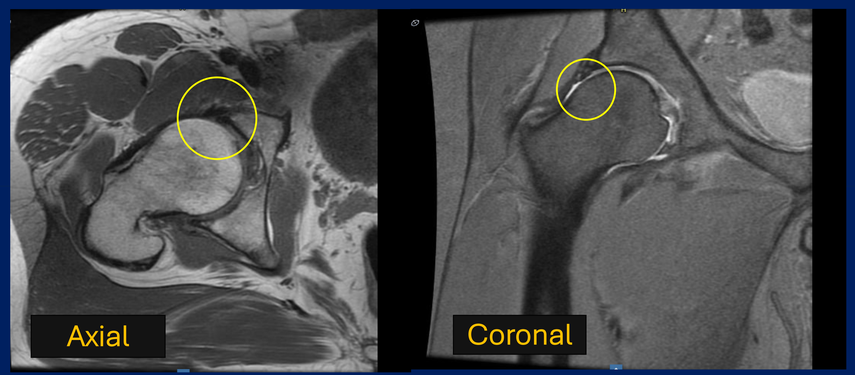
- Completed PT with improvement in strength, but 7/10 pain and mechanical “popping” persisted
- MRI – Mild degenerative fraying of the superior acetabular labrum without frank tear
- Patient opted for US-guided intra-articular and TFL tendon prolotherapy injection

Imaging

R Hip XR: CAM lesion and superolateral enthesopathy



R Hip MRI: Mild degenerative fraying of the superior acetabular labrum; No frank tear



Final Outcomes

- **3 week follow-up: complete resolution of pain with return to light exercise**
- **3 month follow-up: 4/10 pain, functionally stable**
- Surgical labral debridement with CAM resection was deferred given resolution of symptoms

Discussion

- Femoroacetabular impingement (FAI) is traditionally managed conservatively (stretching and strengthening exercises)
- Chronic impingement can damage joint structures such as the cartilage and labrum
- Surgical intervention remains standard practice for refractory FAI and labral tears
- This case highlights ultrasound-guided prolotherapy as a viable and effective adjunct to conservative management

Conclusion

- **Prolotherapy provides a non-operative and minimally invasive alternative for patients with FAI and labral fraying.**
- **A multimodal approach incorporating physical therapy and prolotherapy can successfully resolve primary joint pathology and improve pain outcomes.**

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