GRACILIS SYNDROME

Description

Gracilis syndrome is characterized by inflammation and pain in the front of the pelvis where the gracilis muscle attaches to the pelvis. This muscle allows the hip to move across the body. Muscle attaches to bone via tendon. The injury occurs at the attachment of the muscle via its tendon into the front of the pelvis. It is tendinitis or a strain of the attachment of the gracilis to the pelvis.

Common Signs and Symptoms

Symptoms usually start slowly and insidiously after the exacerbating activity and progress to affect the whole activity, leading to constant pain.

- Pain, discomfort or ache, tenderness, and swelling at the front of the pelvis that may extend to the groin or inner thigh
- Pain that worsens with pivoting on one leg, such as kicking a ball, sprinting, jumping, climbing stairs, or sudden change of direction while running; also pain that worsens with stretching, particularly when separating the legs and thighs or when bringing the thighs or legs together against resistance
- Walking or running with a limp
- Weakness bending the hip or kicking

Causes

- Usually, from prolonged overuse
- Sudden increase in amount or intensity of activity
- Muscle imbalance or weakness
- Sudden single episode of stressful overactivity, such as during kicking

Risk Increases With

- Repetitive kicking, such as with soccer or football kicking
- Sports that require repetitive jumping
- Distance runners, fencers, ice hockey players, and weightlifters
- Sports that require the legs to be brought together, such as gymnastics and horseback riding
- Poor physical conditioning (strength and flexibility)
- Previous osteitis pubis
- Previous sprain or injury to the pelvis
- Stiffness or loss of motion of the hip or previous hip injury

Preventive Measures

- Appropriately warm up and stretch before practice or competition.
- Maintain appropriate conditioning:
  - Hip and thigh flexibility
  - Muscle strength and endurance
  - Cardiovascular fitness
- Use proper sports technique.

Expected Outcome

This condition is usually curable within 2 to 6 weeks if treated appropriately with conservative treatment and resting of the affected area.

Possible Complications

- Prolonged healing time if not appropriately treated or if not given adequate time to heal
- Recurrence of symptoms and injury if activity is resumed too soon
- Untreated, progression to a complete tear (rare) or other injury due to limping and favoring of the injured leg
- Prolonged disability

General Treatment Considerations

Initial treatment consists of medication and ice to relieve the pain, stretching and strengthening exercises, and modification of the activity that initially caused the problem. These all can be carried out at home, although referral to a physical therapist or athletic trainer for further evaluation and treatment may be helpful. An injection of cortisone may be attempted to relieve the symptoms and inflammation. Very gradual return to sports is attempted after all symptoms have disappeared. If symptoms persist despite conservative treatment of at least 6 months and the athlete is unwilling or unable to give up participating in the sport, surgery may be needed. Surgery is rarely necessary and usually involves

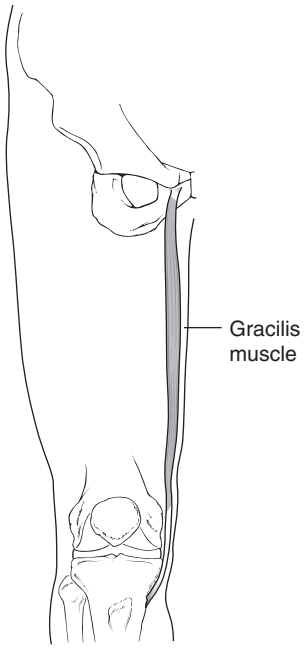


Figure 1

removal of chronically inflamed or scarred tissue or release of the tendon of the gracilis.

Medication

- Nonsteroidal anti-inflammatory medications, such as aspirin and ibuprofen (do not take within 7 days before surgery), are often recommended to reduce inflammation. Take these as directed by your physician. Contact your physician immediately if any bleeding, stomach upset, or signs of an allergic reaction occur. Other minor pain relievers, such as acetaminophen, may also be used. Topical ointments may be of benefit.
- Pain relievers may be prescribed as necessary. Use only as directed and only as much as you need. Usually only prescribed for pain relief after surgery.
- Injections of corticosteroids may be given to reduce inflammation, although not usually for acute injuries.

Heat and Cold

- Cold is used to relieve pain and reduce inflammation for acute and chronic cases. Cold should be applied for 10 to 15 minutes every 2 to 3 hours for inflammation and pain and immediately after any activity that aggravates your symptoms. Use ice packs or an ice massage.
- Heat may be used before performing stretching and strengthening activities prescribed by your physician, physical therapist, or athletic trainer. Use a heat pack or a warm soak.

Notify Our Office If

- Pain, tenderness, or swelling worsens or does not improve despite 2 to 6 weeks of treatment
- New, unexplained symptoms develop (drugs used in treatment may produce side effects)

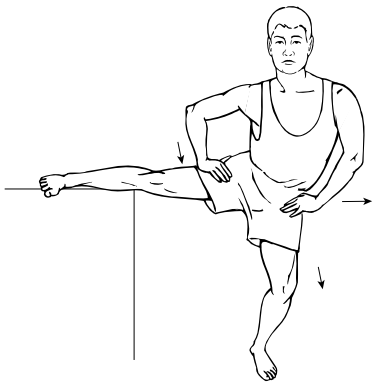
➢ **RANGE OF MOTION AND STRETCHING EXERCISES** • Gracilis Syndrome

These are some of the ***initial*** exercises you may start your rehabilitation program with until you see your physician, physical therapist, or athletic trainer again or until your symptoms are resolved. Please remember:

- Flexible tissue is more tolerant of the stresses placed on it during activities.
- Each stretch should be held for 20 to 30 seconds.
- A ***gentle*** stretching sensation should be felt.

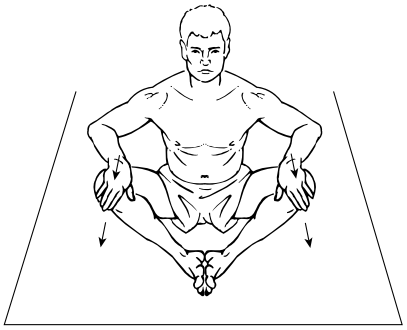
FLEXIBILITY • Adductors, Lunge

1. Spread your legs wide while standing. Then assume a partial "squat" position.
2. "Lunge/Lean" away from the side you want to stretch, shifting your weight toward the bent leg.
3. Hold this position for _____ seconds.
4. Repeat exercise _____ times, _____ times per day.



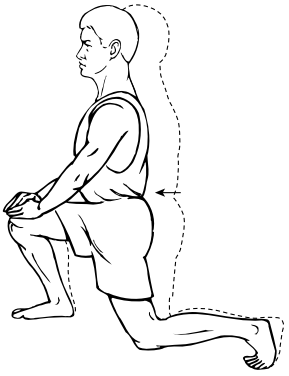
FLEXIBILITY • Adductors, Ballet

1. Stand and place the leg you want to stretch on a counter, chair, or other sturdy object.
2. Gradually bend the opposite knee and gently lunge away from the leg you are stretching.
3. Hold this position for _____ seconds.
4. Repeat exercise _____ times, _____ times per day.



FLEXIBILITY • Hip Adductors

1. Sit on the floor with the soles of your feet together as shown. Keep your heels as close to your body as is comfortable.
2. Place your hand on top of your knees and push your legs/knees down toward the floor.
3. You will feel a stretch in your groin.
4. Hold this position for _____ seconds.
5. Repeat exercise _____ times, _____ times per day.



FLEXIBILITY • Hip Flexors, Lunge

1. Assume the position shown in the diagram.
2. Lunge forward, leading with your hips. Do not bend forward at the waist. Keep your chest upright.
3. Hold this position for _____ seconds.
4. Repeat exercise _____ times, _____ times per day.

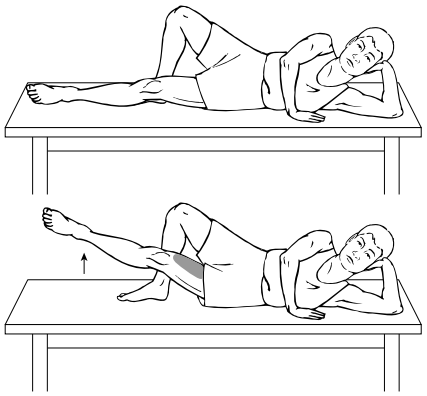
➢ **STRENGTHENING EXERCISES** · Gracilis Syndrome

These are some of the ***initial*** exercises you may start your rehabilitation program with until you see your physician, physical therapist, or athletic trainer again or until your symptoms are resolved. Please remember:

- Strong muscles with good endurance tolerate stress better.
- Do the exercises as ***initially*** prescribed by your physician, physical therapist, or athletic trainer. Progress slowly with each exercise, gradually increasing the number of repetitions and weight used under their guidance.

STRENGTH · Hip Adduction

1. Sit on a chair and place a large ball (volleyball or basketball size) between your legs as shown.
2. Squeeze your thighs together.
3. Hold this position for _____ seconds.
4. Repeat exercise _____ times, _____ times per day.



STRENGTH · Hip Adduction

1. Lie on your side as shown with the injured/weak leg on the bottom.
2. Place the foot of your top leg flat on the floor for balance. It may be in front or behind the bottom leg.
3. Lift the bottom leg as shown. Hold this position for _____ seconds.
4. Slowly lower your leg to the starting position.
5. Repeat exercise _____ times, _____ times per day.

Notes: (Up to 4400 characters only)

Notes and suggestions