

Bursitis

This is a painful condition that affects the small, fluid filled sacs (bursa) that cushion the bones, tendons and muscles near your joints. Bursitis occurs when the bursa become inflamed. The most common locations for bursitis are in the shoulder, elbow, hip and knee region.

Shoulder Bursitis: There are 3 bursa sacs in the shoulder region that can become inflamed and lead to shoulder pain and loss of range of motion. Bursitis in this region can also lead to rotator cuff pathology. Causes of bursitis in this region include: overuse of the extremity, repetitive overhead movements, and trauma.

Elbow Bursitis: Direct or repetitive trauma over the tip of the elbow is the most common cause of this bursitis.

Greater Trochanteric (**Hip**) - This condition is characterized by an aching pain over the outside of the hip. There is also often swelling in the region, distinct tenderness in the region and pain with extremes of hip movement. Causes of bursitis in this region include: falling or direct impact on the outside of the hip, arthritis in the hip, and/or friction from the IlioTibial Band with running.

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Knee Bursitis: There are many bursa sac that surround the knee joint and are susceptible to irritation. Bursitis can occur above or below the kneecap due to overuse and tightness of the quadriceps muscles. Bursitis can occur on top of the kneecap following a direct impact (fall) or sustained kneeling positions. Bursitis can also occur on the inner aspect of the knee due to tight hamstrings, groin muscles, poor mechanics through the knee joint and from being flat footed.

Bursitis rehabilitation includes: modalities to alleviate inflammation (Rest, Ice, Compression, Elevation) [at Physio we offer: UltraSound, Interferential Current], manual therapy and mobilization techniques to the affected joints to restore mobility and flexibility and when appropriate strengthening exercises. Bursitis is often caused by a muscle imbalance in the region surrounding the bursa sac, therefore for future prevention a customized stretching and strengthening program is required for long-term success. In cases when symptoms are persistent despite the appropriate management, a corticosteroid injection has been shown to provide good pain relief.

Information taken from Orthopedic Physical Assessment Sixth Edition written by David J. Magee