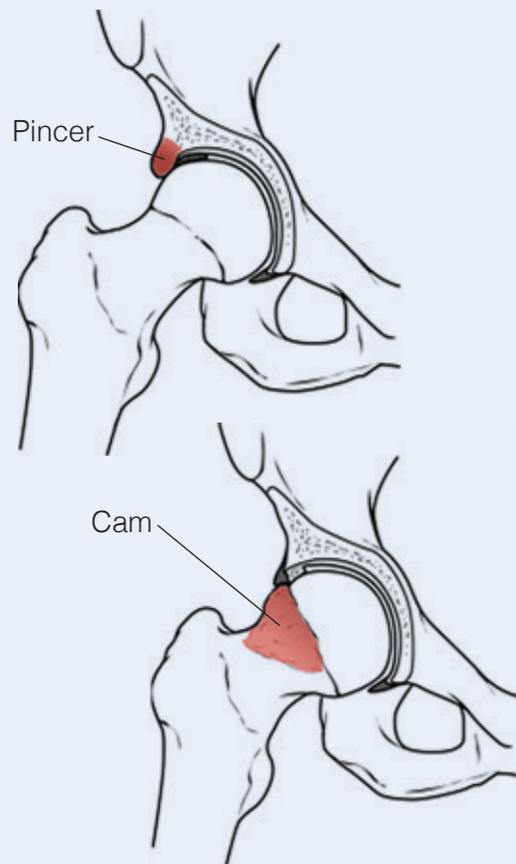


Three Types of FAI

Pincer Impingement. Extra bone extending out over the normal rim of the acetabulum can crush the labrum.

Cam Impingement. If the femoral head is not perfectly shaped for the acetabulum, it won't rotate smoothly. A bump forms on the edge of the femoral head that grinds the cartilage inside the acetabulum.

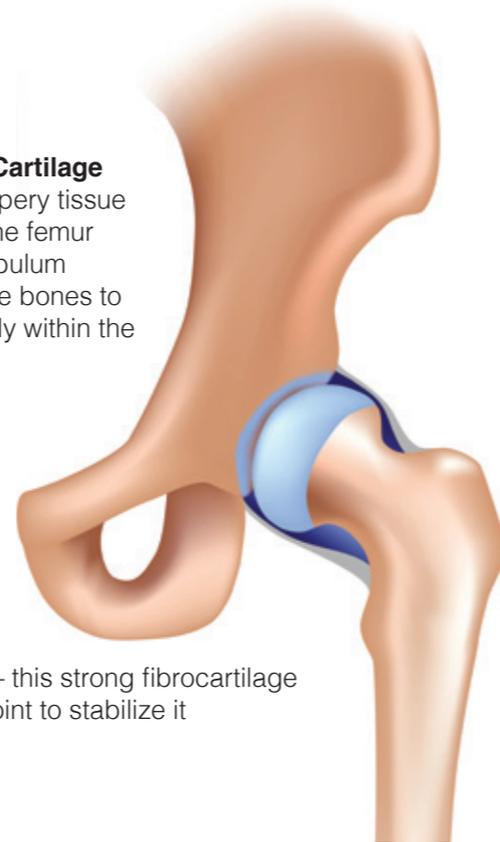
Combined. When both pincer and cam impingement are present, it's called combined impingement.



Understanding the Hip

The hip is a ball-and-socket joint, where the femur (ball) fits into the cup-like acetabulum (socket) where it can freely rotate, stabilized by labrum which fits over it like a gasket.

Articular Cartilage
— this slippery tissue between the femur and acetabulum enables the bones to rotate easily within the joint.



Labrum — this strong fibrocartilage rings the joint to stabilize it

Hip Impingement or “FAI”

Femoroacetabular Impingement or FAI results from an orientation, shape or overgrowth on the femoral head (ball) within the acetabulum (socket) that prevents a full range of motion.

The impingement often causes damage to the joint, such as tearing of the labrum likely to result in joint instability and breakdown of articular cartilage (osteoarthritis), causing pain and restricting movement.

Learn More

Visit our website's Medical Library to explore more about the hip, femoroacetabular impingement, and even surgical repair videos. You can also learn more about Dr. Schweiger and OPA's other hip specialists. If you have questions, you are welcome to call Dr. Schweiger's medical team or simply schedule an appointment.

Appointments:

562-2277

FAI Questions:

249-5545 (Jessica)

Website & Medical Library:

OPAlaska.com



OrthoAlaska LLC



OrthoAlaska LLC

Understanding Hip Impingement

Symptoms, causes and treatment options for Femoroacetabular Impingement (FAI).



Symptoms

Some people live long, active lives with FAI and never have problems. When symptoms develop, however, it usually indicates damage to the cartilage or labrum — and that the disease is likely to progress. Typical symptoms include one or more of the following:

- Pain in the groin area.
- Pain toward the outside of the hip.
- Sharp stabbing pain (or dull ache) with turning, twisting or squatting.

When symptoms first occur, try to identify the activity you may have done to cause the pain

— and avoid it for a while. Let your hip rest and see if the pain settles down. Over-the-counter anti-inflammatory medicines (ibuprofen, naproxen) may help, too.

If your symptoms persist, it's important that you don't just keep pushing through the pain. The longer painful symptoms go untreated, the more damage FAI can cause.

Instead, seek medical advice for a proper diagnosis — and recommended solutions.



Treatment Options

A proper diagnosis helps determine the best course of action. On the initial visit, the provider will likely do a simple impingement test — bringing your knee towards your chest and rotating it. Further diagnostic tests may also be needed. These may include X-rays, CT or MRI scans or injection of a temporary numbing agent.

Depending on the type and severity of the impingement identified, your provider may recommend one or more of the following treatments, typically starting with the most conservative approach.

Activity changes.

Simply changing your daily routine and avoiding activities that cause symptoms may be all you need.

Non-steroidal anti-inflammatory medications

Drugs like ibuprofen can be provided in a prescription-strength form to help reduce pain and inflammation.

Physical therapy.

Specific exercises can improve range of motion and strengthen muscles around the hip. While this can relieve stress on injured areas and offer relief from other causes of hip pain, it may not be effective for FAI.

FAI Surgery.

If tests indicate joint damage caused by FAI, and your pain is not relieved by nonsurgical treatment, surgery may be recommended.

More About FAI Surgery

Many FAI problems can be treated with arthroscopic surgery — with just a few small incisions — to repair damage to the labrum and articular cartilage and to remove the excess bony material from a cam or pincer lesion. More severe cases may require an open operation (larger incisions) or even total hip replacement.

Correcting the impingement through surgery can prevent future damage to the hip joint. However, not all damage can be completely fixed by surgery, especially if treatment has been delayed and the damage is severe. It is also possible that more problems could develop in the future. Be sure to talk to your physician about the risks and benefits for your particular situation.

“We always recommend starting conservatively, but surgical treatment is often the most effective method of long-term pain relief — and hip preservation.”

— Greg Schweiger, M.D

Dr. Schweiger, FAI Specialist

Greg P. Schweiger, M.D. is a board-certified orthopedic surgeon who is one of Alaska's few fellowship-trained orthopedic traumatologists. He is known for his abilities to perform complex hip repairs and FAI surgery is one of his special interests. Dr. Schweiger also practices sports medicine and has a keen interest in helping his patients regain full mobility and return to an active life.

