



HIP LABRAL TEARS IN ATHLETES

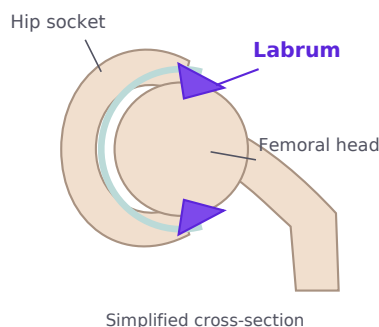
Symptoms, functional assessment, rehabilitation & return to sport

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1 WHAT IS IT?

The labrum is a ring of fibrocartilage at the rim of the hip socket. A tear may accompany **deep groin pain, painful rotation, or catching**.

Similar symptoms can come from other tissues.¹



2 WHY ATHLETES SHOULD KNOW

Comfortable walking does not establish readiness for repeated sprinting, cutting, or batting.²

MRI labral findings also occur in athletes without pain.³

An MRI finding alone cannot identify the pain source or determine the need for surgery.^{1,3}

3 FUNCTIONAL DIAGNOSIS

A clinician integrates the history, examination, function, and imaging.^{2,4}



History

Locate familiar pain; record onset, triggers, and activity response.



Examination

Assess hip motion, strength, and other possible pain sources.



Function

Start with appropriate squat or single-leg tasks; build toward sport.



Reassess

Repeat the same measures. Check later and next-morning responses.

FADIR / FABER do not confirm a symptomatic tear alone. Do not force painful self-tests.^{1,2}

4 WHEN TO SEEK CARE

Urgent: severe pain after trauma, inability to bear weight, fever/illness with hip pain, or a hip that stays stuck.⁴

Increasing groin pain with walking/running or a new limp needs prompt review. If a femoral neck stress injury is suspected, **stop sport, avoid weight-bearing, and seek urgent assessment.** Do not test with hopping.⁵

Growing athletes: a new limp with hip, thigh, or unexplained knee pain needs prompt, preferably same-day, assessment. Stop sport; if a slipped hip growth plate (SCFE) is suspected, avoid weight-bearing until assessed.⁶

Arrange a clinical review for recurring pain, painful catching, or worsening function. Hip shape, dysplasia, and instability can change treatment decisions.^{1,4}

5 TREATMENT & REHABILITATION OVERVIEW

Example progression after assessment, for nonsurgical care. Individualize the starting point and pace.^{2,7}

Adjust load

Modify painful depth, speed, or volume. Keep comfortable conditioning.

Build capacity

Hip and trunk strength: e.g., bridge and suitable step-up.

Single-leg control

Progress split squat, step-down, and hinge as tolerated.

Sport skills

Add running, braking, rotation, and cutting as appropriate.

Repeated practice

Build sustainable training volume and intensity toward competition.

Do not force a sharp hip pinch. Monitor symptoms and recovery between sessions. Persistent limitations merit specialist discussion. After surgery, follow the treating team's restrictions.^{1,7}

6 RETURN TO SPORT: THE TAKE-HOME

☒ Symptoms & motion ☒ Strength & power ☒ Repeated sport skills ☒ Practice & recovery ☒ Confidence

Pain relief or elapsed time alone is not clearance. Assess readiness across these domains; no single test guarantees return.⁸

SELECTED REFERENCES (ABBREVIATED AMA) • Click an entry for the source

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