

Diagnostic Utility of Combinations of Tests for Osteoarthritis of the Hip



Overview

Hip Pain is a common pathology in orthopedic practice.

The most frequent pathologies include:

1. Trochanteric bursitis.
2. Osteoarthritis (OA).
3. Labral lesions.
4. Muscle sprains and strains.
5. Avascular necrosis.
6. Femoroacetabular impingement.
7. Piriformis syndrome.
8. Ischial bursitis.

A published journal article in Arthritis Rheumatology reported OA is often suspected in clinical presentations, where the patient is 60 years old or greater, and reports pain and stiffness in the hip with possible radiation into the groin.

Recent research published in 2008 examined five diagnostic variables and their utility in detecting OA.

1. Squatting.
2. Active hip flexion.
3. Scour test with adduction.
4. Active hip extension.
5. Passive internal rotation less than 25°.

The study examined 78 patients with unilateral pain in the buttock, groin, or anterior thigh. The reference standard used was hip OA detected on a radiograph using Kellgren and Lawrence grading scale.

Similar to most research on combinations of clinical tests, the sensitivity, specificity, and likelihood ratios improved in direct correlation to the number of variables present.

A positive test for squatting, active hip flexion, the Scour test, and active hip extension is indicated by pain reproduction.

Variables Present	Sensitivity	Specificity	+LR	-LR
5/5	0.14	0.98	7.3	0.87
4/5	0.48	0.98	24.3	0.53
3/5	0.71	0.86	5.2	0.33
2/5	0.81	0.61	2.1	0.31
1/5	0.95	0.18	1.2	0.27

Clinical Implications

Hip pain is a common presentation in most outpatient settings.

Proper differential diagnosis tests help to determine an accurate diagnosis, resulting in more efficient care.

At PRO Therapy, our Physical Therapists utilize the five aforementioned tests in our assessment of hip pain... resulting in improved outcomes for your referrals.

References:

- Arthritis Rheum. 1991; 34: 505-514
 JOSPT. 2008; 38: 542-550



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Patricia came to physical therapy after having both of her hips replaced. She couldn't walk without assistance, sleep without pain, or take care of her horses.

At her initial evaluation at PRO Therapy, her initial lower extremity strength measures were as follows: Quadriceps (R/L): 3+/5; Hamstrings (R/L): 4-/5.

Upon completion of her plan of care, Patricia was able to return to walking, sleeping and caring for her horses full time without any limitations. At discharge, her lower extremity strength measures were as follows: Quadriceps (R/L): 5/5; Hamstrings (R/L): 5/5.

"PRO Therapy is the best! I had two hips that were extremely chewed up and I was very sure I wouldn't be able to regain normalcy. After 2 hip surgeries with Dr. Gough at Hedley Institute and lots of physical therapy with the PRO Therapy staff I feel like I am 30 again!"

-Patricia Somers

