

Groin Pull Summary Sheet – AKA adductor tendonitis, adductor strain, & horseback riders strain

Pathology: Groin injuries are common in athletes. Chronic groin injuries tend to occur in those who participate in activities that promote overuse of the groin area (swimming, ice hockey, speed and figure skating, soccer, running). Groin injuries resulting from major trauma can occur as well.

History: Multiple muscles, including the iliopsoas muscle, the adductor group, and the gracilis muscle, attach to the medial portion of the femur or pubis and help keep the legs together and flex the thigh. Falling, running, and quickly changing directions, as well as kicking or doing splits can result in these injuries. Groin pulls can cause pain in the groin that radiates down the inside of the thigh. The injury is usually focused at the musculotendinous junction and involves disruption of the fibers to various degrees. These weakened areas are repaired by fibroblasts, but they continue to be susceptible to repeat injury for a long time. Groin pulls take an extraordinary amount of time to heal. Sometimes, the relevant muscles may actually tear loose from their bony attachments, taking a piece of the bone with it. Most groin pulls eventually respond to conservative treatment that consists of rest, massage, the application of ice and/or heat, compression, and the use of NSAIDs. These injuries may be adequately managed by proper stretching and strengthening and regular bodywork.

Assessment: Since this is a tendonitis (overuse) condition it would hurt

- 1) the local region
- 2) upon resisted contraction - adduction
- 3) upon passive stretching - abduction

Bolstering/Patient comfort: Ensure that all muscles are relaxed during treatment

Heat/Cold Therapy: Apply ice to the injured area in the acute phase (first 48 hours after injury), and then after activities. Ice will help calm the inflammatory response and stimulate blood flow to the area. Heat Applications are useful for chronic conditions. Before activities, gentle heating can help loosen the muscle. Apply a heat pack to the groin prior to stretching or exercising. As a general rule of thumb, remember to heat before, and ice after.

General Massage: Massage all muscles around the thigh with effleurage & petrissage

Specific Massage: start out with compression, thumb stripping, broadening, work on trigger pts, & active myofascial release works very well on entire upper thigh & ITB region.

Stretching: Gentle stretching is helpful, but it should not be painful. Stretching excessively can be harmful and slow the healing process. Show client how to do adductor stretches properly.

Strengthening: Education patient about proper hip adductor and abductor strengthening with resistance bands.

Patient Education: REST! Avoiding painful activities that irritate the groin for several days followed by a gradual return to activity is very important. Foam rollers are particularly effective to break up any trigger points along the ITB, quadriceps, and hamstrings; self massage around the entire thigh region particularly the groin area is very helpful.

Home Recommendation: Educate patient about proper taping. Groin pulls are usually hyperextension of one or more of the adductor muscles of the hip and pelvis. The muscles of the groin can become very sore or even rip when stretched too far. The purpose of taping a groin injury is to allow as much normal range of motion in the muscles as is practical given the severity of the injury without allowing further hyperextension that can aggravate the condition.

Read more: [How to Tape a Groin Injury | eHow.com http://www.ehow.com/how_5628222_tape-groin-injury.html#ixzz0uoSNpIGb](http://www.ehow.com/how_5628222_tape-groin-injury.html#ixzz0uoSNpIGb)

Medical Referral: It is appropriate to co-treat the patient with another medical professional and or after receiving medical approval. Other more serious conditions may be overlooked.