



Physiotherapist-led treatment for femoroacetabular impingement syndrome (the PhysioFIRST study): an assessor-blinded, limited disclosure randomised controlled trial



Background

Femoroacetabular impingement (FAI) syndrome is a common cause of hip pain in young to middle-aged adults.

While physiotherapy is recommended for people with FAI syndrome, the effectiveness of exercise as a treatment option has not been tested head-to-head in large randomised controlled clinical trials.

The questions

1. Is a physiotherapist-led program of targeted strengthening exercises superior to a physiotherapist-led program of standardised stretching exercises?
2. What are the effects of these physiotherapist-led treatments on quality of life, pain, function, hip strength, range of motion, functional task performance and kinesiophobia?



The study

- 154 participants with FAI syndrome received a physiotherapist-led program of exercise and education for six months, with half receiving a targeted strengthening program (STRENGTH) and half receiving a standardised stretching program (STRETCH).
- The researchers analysed quality of life, pain and function as well as a variety of secondary outcomes including pain, symptoms, physical function and hip and/or groin-related quality of life.

The results

- Six months of physiotherapist-led targeted strengthening was not superior to standardised stretching for hip-related quality of life – both groups had significant improvements in hip-related quality of life.
- Participants in the STRENGTH group were twice as likely to have improved pain and had larger improvements in hip muscle strength compared to the STRETCH group.



Clinical implications

- Clinicians treating people with FAI syndrome could consider physiotherapist-led treatment as a genuine first-line treatment option.

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