

BACKGROUND

Greater Trochanteric Pain Syndrome (GTPS) causes lateral hip pain likely from gluteus medius (GMed) tendinopathy and iliotibial band (ITB) tension. Conservative treatments often fail. This study evaluates 2-year outcomes of combined ITB and GMed percutaneous ultrasound tenotomy (PUT), a minimally invasive alternative to surgery.

INTRODUCTION

GTPS is a disabling condition now understood as an enthesopathy involving the GMed and ITB. PUT targets these structures under ultrasound guidance. Prior studies showed short-term benefits; this study assesses long-term (24-month) outcomes in a large cohort.

METHODS

This retrospective study analyzed outcomes following GMed/ITB tenotomy performed between January 2022 and August 2023. A total of 79 hips with 24-month follow-up data were included. Follow-up data were available at 1, 6, 12, and 24 months via chart review and phone interviews. The primary outcome was ≥50% reduction in pain on the NRS. Secondary outcomes included improvement in side-lying and sit-to-stand tolerance, and the need for additional interventions on the affected hip.

RESULTS

Characteristic	Value
Total Hips	79
Total Patients	69
% Female	95.7%
Mean Age (± SD)	63.2 ± 11.3 years
Mean BMI (± SD)	32.8 ± 7.3
Mean ITB Thickness	6.6 mm
Average Follow-Up Duration	30.3 months (range 21–40)
Pain (NRS –Median, IQR)	
Baseline	10 (9–10)
1 / 6 / 12 months	2 (1–4)
24 months	6 (4–10)

Outcome	1 Month	6 Months	12 Months	24 Months
Side-Lying Tolerance Improved	89.9%	89.6%	83.0%	55.7%
Sit-to-Stand Improved	87.3%	90.9%	84.9%	81.0%
Responder Rate	88.6%	89.6%	79.2%	56.9%

DISCUSSION

This 2-year follow-up study demonstrates that combined PUT of the GMed and ITB offers sustained improvements in pain and function for patients with refractory GTPS. While outcomes declined slightly over time, a majority of patients continued to benefit at 24 months.

The dual-target approach addresses both degenerative tendon changes and mechanical tension, offering a more comprehensive solution than single-site treatments. Compared to steroids and PRP, PUT is a minimally invasive, durable, and insurance-covered option.

CONCLUSION

Combined GMed and ITB PUT could be a safe, effective, and durable treatment for GTPS, offering a minimally invasive alternative to surgery with significant long-term improvements in pain and function.

REFERENCES

1. **Wahezi SE**, et al. *Ultrasound-Guided Percutaneous Tenotomy for the Treatment of Greater Trochanteric Pain Syndrome: A Prospective Case Series*. Pain Physician. 2022;25(2):E241–E249.
2. **Fearon AM**, et al. *Greater trochanteric pain syndrome: defining the clinical syndrome*. Br J Sports Med. 2010;44(10):658–662.
3. **Grimaldi A**, et al. *Gluteal tendinopathy: a review of mechanisms, assessment and management*. Sports Med. 2015;45(8):1107–1119.
4. **Baker CL**, et al. *Percutaneous ultrasonomic tenotomy for chronic tendinopathy: a prospective study*. Orthop J Sports Med. 2018;6(9):2325967118798821.
5. **Seng C**, et al. *Ultrasound-guided percutaneous tenotomy for gluteus medius tendinopathy: a pilot study*. J Orthop Surg Res. 2016;11:34.