



Musculoskeletal

Dry needling in greater trochanteric pain syndrome

...an alternative to corticosteroid injections?

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Greater trochanteric pain syndrome (GTPS) is characterized by chronic intermittent pain, combined with tenderness to palpation overlying the lateral aspect of the hip.

GTPS often goes hand in hand with a number of disorders, such as gluteal tears, trigger points or a snapping hip. The most common treatment is a corticosteroid injection. These injections are known for their adverse effects, such as osteonecrosis, osteomyelitis and hallucinations. Another possible treatment, which has way less adverse effects, is dry needling.

The aim of this study was to investigate whether dry needling is as effective as a corticosteroid injection regarding lateral hip pain and improving function in patients with GTPS.

Pain was measured using a numeric rating scale (NRS). The groups did not differ after 6 weeks of treatment. This indicates that dry needling is not inferior to a corticosteroid injection. There was also no difference in function between the 2 groups



Up until today, the mechanism of dry needling is not fully understood. Various studies have found a change in biochemical, neurologic, vascular, and clinical factors. Dry needling can also cause an increase in Substance-P and calcitonin gene-related peptide, which in its turn can cause a decrease in pain.

This study shows that dry needling is as effective as a corticosteroid injections. Dry needling has less side effects and may therefore be an alternative treatment option for GTPS. However, this study only had a 6-week follow-up, and it therefore remains unclear what the long term effects are.

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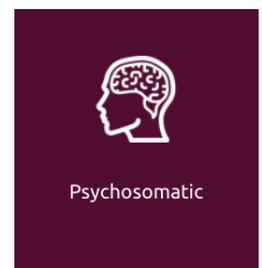
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