

# Hip Abductor Tendon Repair Protocol

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## Phase I (Weeks 0–6) Protection Phase

### **Goals:**

- Protect tendon-to-bone healing
- Minimize pain and inflammation
- Prevent stiffness in adjacent joints

### **Activity / Restrictions:**

- Partial weight bearing with assistive device (typically 20–30 lbs)
- No active hip abduction
- No resisted hip abduction, extension, or external rotation
- No single-leg stance on operative side
- Avoid lying directly on operative side
- Hip flexion typically limited to 90°

### **Brace:**

- Hip abduction brace if prescribed, worn at all times except hygiene

### **Exercises:**

- Ankle pumps
- Quadriceps sets
- Gentle gluteal sets (avoid abductor bias)
- Heel slides (within comfort)
- Passive and active-assisted ROM (avoid abduction)

## Phase II (Weeks 6–10) Early Motion Phase

### **Goals:**

- Restore controlled motion
- Begin gradual muscle activation
- Progress weight bearing safely

### **Activity / Restrictions:**

- Progress to weight bearing as tolerated with assistive device
- Avoid Trendelenburg gait
- Continue to avoid resisted abduction early in phase

### **Exercises:**

- Begin active hip abduction in **gravity-eliminated position only**
- Progress ROM as tolerated
- Initiate core and pelvic stabilization
- Weight shifts and bilateral closed-chain exercises
- Gentle balance training (double-leg)

### Phase III (Weeks 10–16) Strengthening Phase

#### **Goals:**

- Restore strength and neuromuscular control
- Normalize gait

#### **Activity:**

- Progress to full weight bearing without assistive device
- Normalize gait pattern

#### **Exercises:**

- Side-lying hip abduction
- Standing resisted abduction (bands)
- Mini-squats, step-ups
- Progressive core strengthening
- Balance and proprioception training

#### **Precautions:**

- Avoid compensatory trunk lean
- Avoid pain with strengthening

### Phase IV (Weeks 16–24) Advanced Strengthening

#### **Goals:**

- Improve endurance and dynamic stability
- Prepare for higher-level function

### Exercises:

- Single-leg stance and dynamic balance
- Lateral movements and controlled side-stepping
- Functional strengthening
- Low-impact cardio (bike, elliptical)

### Phase V (6 Months+) Return to Activity

#### Goals:

- Return to full functional activity

#### Progression:

- Gradual return to higher-impact activity
- Sport- or work-specific training

#### Criteria for Return:

- Pain-free motion
- Symmetric strength
- No Trendelenburg
- Good pelvic control

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### Special Considerations

- Larger tears or poor tissue quality may require slower progression
- Concomitant procedures may alter restrictions
- Persistent limp = **do not advance prematurely**

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### Progression Criteria

Advancement is based on:

- Pain control
- Tendon healing
- Restoration of motion
- Strength and pelvic stability
- Gait normalization