

Coxa Saltans

Les ressauts de hanche

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Traumatologie du Sport

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LYONORTHOCLINIC

Coxa Saltans ?

Ressaut Intra Articulaire

Ressaut Interne

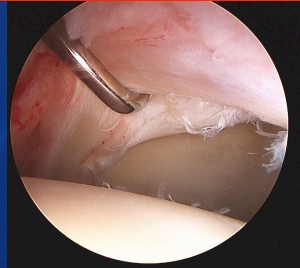
Ressaut Externe

Labral Tears, hcondral flaps and loose bodies to be excluded= Remaining: Snapping Psoas

Coxa Saltans ?

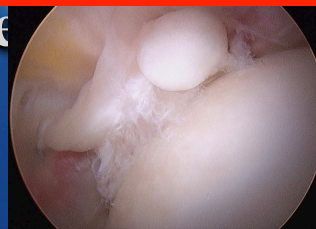
Ressaut Intra Articulaire

**Languette
Labrale**



**Clappet
Chondral**

**Déchirure du
Ligament Rond**



**Corps
étranger**



Labral Tears, hcondral flaps and loose bodies to be excluded= Remaining: Snapping Psoas

Coxa Saltans ?

Ressaut Intra Articulaire

Ressaut Interne

Ressaut du Psoas

Ressaut Externe

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Coxa Saltans ?

Ressaut Intra Articulaire

Ressaut Interne

Ressaut Externe

Ressaut du TFL

Labral Tears, hcondral flaps and loose bodies to be excluded= Remaining: Snapping Psoas

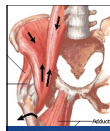
Tendinopathies

Ressaut Intra Articulaire

Ressaut du Psoas

Ressaut du Tenseur du Fascia Lata

Labral Tears, hcondral flaps and loose bodies to be excluded= Remaining: Snapping Psoas



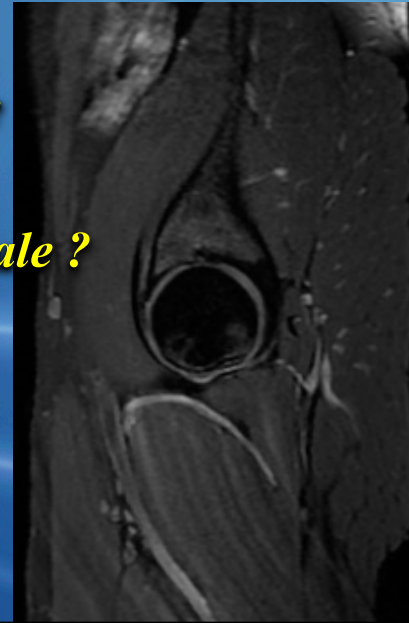
Ressaut du Psoas

Origine :

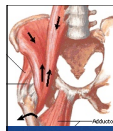
Eminence Ilio-pectinée

Lésion Labrale ?

Forme de la tête fémorale ?



3 mechanisms=



Ressaut du Psoas

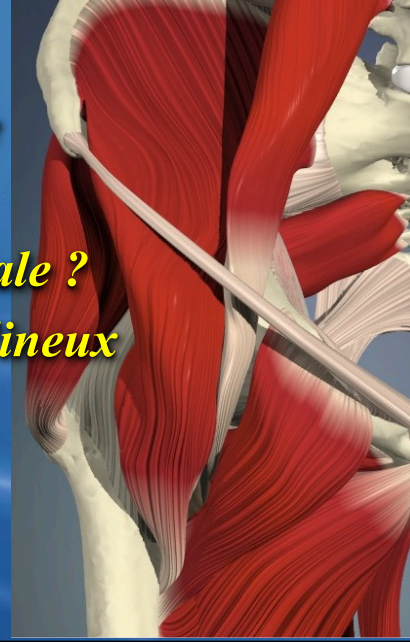
Origine :

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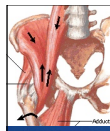
Lésion Labrale ?

Forme de la tête fémorale ?

Twisting Musculo-tendineux



3 mechanisms=



Ressaut du Psoas

Symptomes :

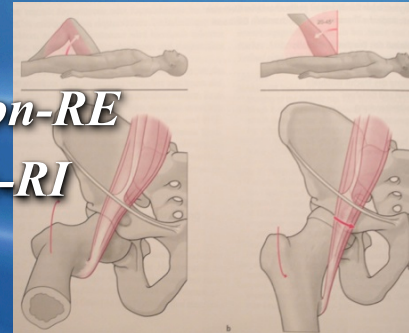
Douleurs élévation Cuisse

Douleur Montée Escaliers

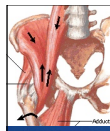
Ressaut Audible +++

De la Flexion-Abduction-RE

à Extension-Adduction-RI



3 mechanisms=



Ressaut du Psoas

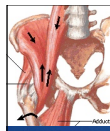
Traitement :

Conservateur les 6 premiers mois

- ✓ *Etirement du Psoas*
- ✓ *Renforcement en Excentrique*
- ✓ *Technique Ostéopathique*



3 mecanismes=



Ressaut du Psoas

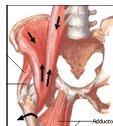
Traitement :

Conservateur les 6 premiers mois

- ✓ *Infiltration Cortisonée*
- ✓ *Infiltration PRP*
- ✓ *Infiltration Toxine botulinique*



Pas ou Plus de douleur = Pas de chirurgie
(5-10% asymptomatique)
Allen WC, JAAOS 1995



Ressaut du Psoas

Chirurgie à ciel Ouvert
= Fort taux de complication

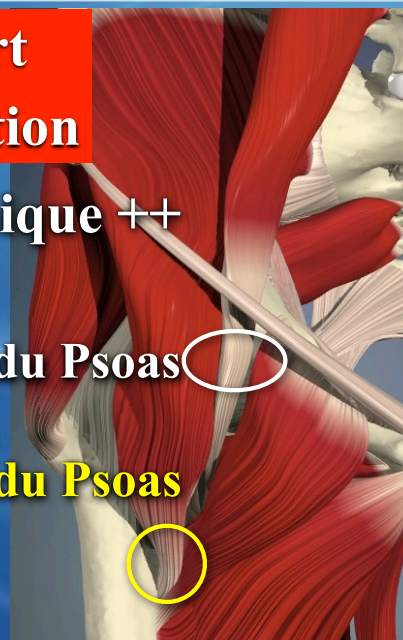
=>Chirurgie Arthroscopique ++

2 Techniques =

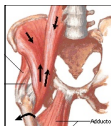
✓ **Section Trans capsulaire du Psoas**

✓ **Section Extra articulaire du Psoas**

Au niveau du petit Trochanter



Section at the level of the Lesser Trochanter



Ressaut du Psoas

2 Techniques ?

Arthroscopy 2009 =

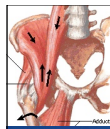
Prospective randomized study of 2 different techniques for endoscopic iliopsoas tendon release in the treatment of internal snapping hip syndrome.

Ilizaliturri VM Jr et al

Group 1 (N=10) = Section Endoscopique du Psoas au niveau du petit trochanter

Group 2 (N=9) = Section Arthroscopique du Psoas Trans Capsulaire

Resultats = Pas de différence Clinique



Ressaut du Psoas

2 Techniques ?

Mon Option =

✓ Section Trans capsulaire

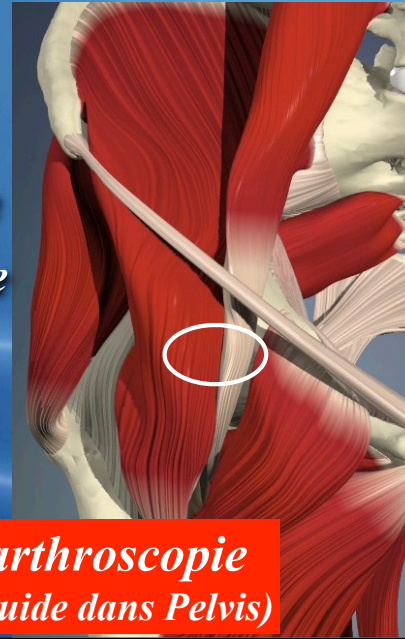
Checking Intra Articulaire

56% pathologie intra articulaire associée

Byrd - Arthroscopy supp 1995

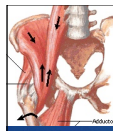
Section Trans Musculaire

Pas de Radioscopie



*Procedure en fin d'arthroscopie
(Risque d'Extravasation liquide dans Pelvis)*

Section at the level of the Lesser Trochanter

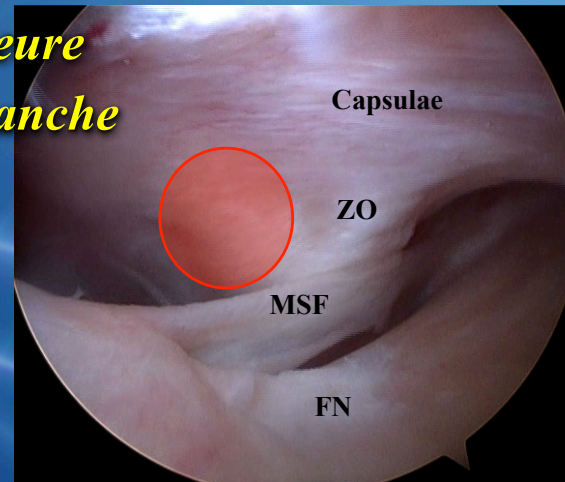


Ressaut du Psoas

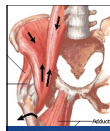
Section Trans capsulaire du Psoas

Capsulotomie inférieure

20-40° Flexion de hanche



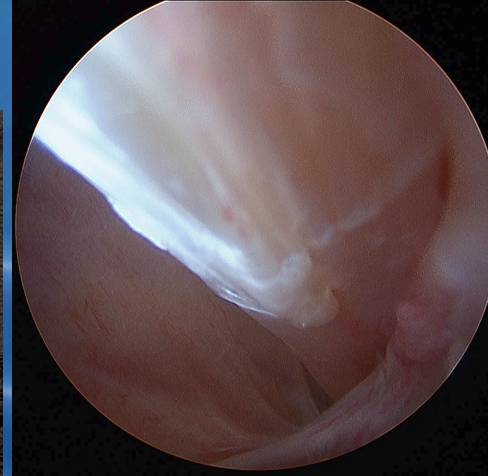
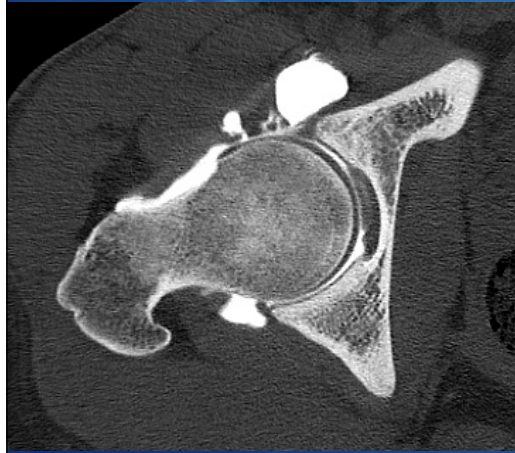
Rotation Hanche pour visualiser le Tendon



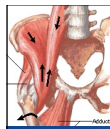
Ressaut du Psoas

Section Trans capsulaire du Psoas

Parfois =



Medial Synovial Fold



Ressaut du Psoas

Résultats

6-8 semaines de Déficit de Flexion de hanche

Anderson SA et al. Am J Sports Med 2008 =

15 athlètes / Suivi Moyen = 17 mois

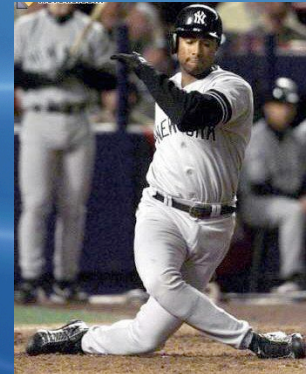
12/15 lésions labrales

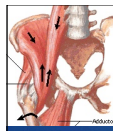
Pas de complications

Pas de déficit au Recul

100% Retour même niveau sportif

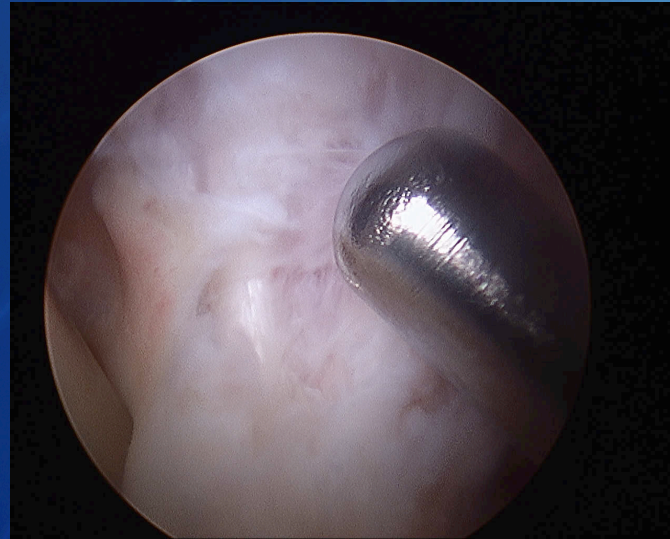
Préopératoire





Ressaut du Psoas

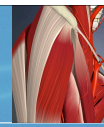
et PTH ++



*Excellente
Indication*

After Xr, Ct scan and MRI. It permit an articular Washout and debridment of the fracture.

Ressaut du TFL

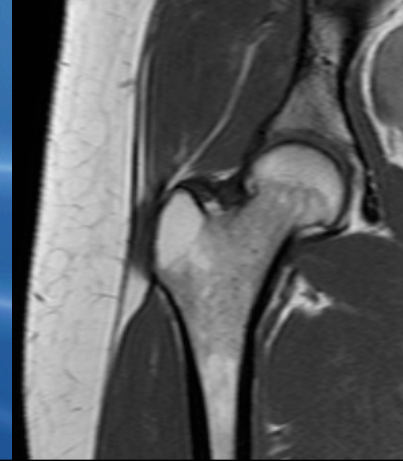
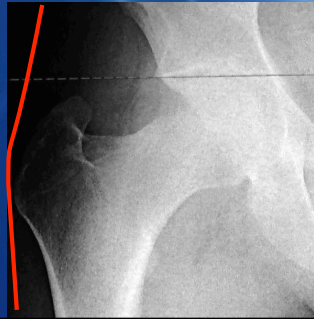


Origine :

Frottement TFL sur Grand Trochanter

Lésion Gm/GM ?

Offset Femoral



3 mechanisms=

Ressaut du TFL



Symptomes :

Douleur latérale

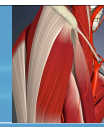
Ressaut +/- Audible

Visible +++

de l'Extension

à la Flexion (20°)

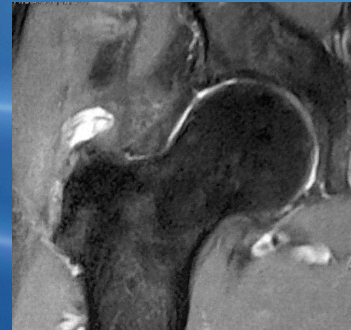
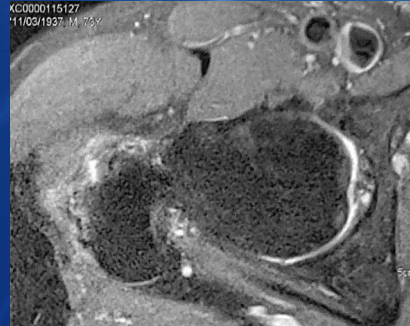
Ressaut du TFL



Imagerie =

Diagnostic Clinique

IRM Recherche Lésions Associées +++



Syndrome de la «coiffe» de la hanche +++

3 mechanisms=

Ressaut du TFL

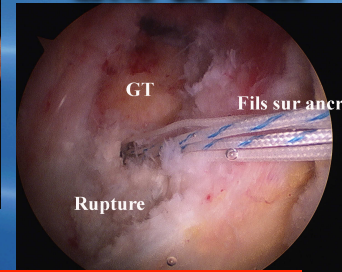
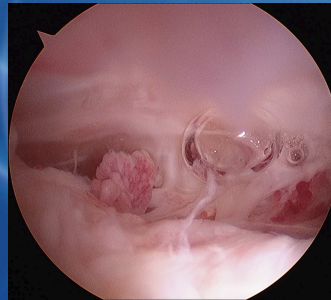
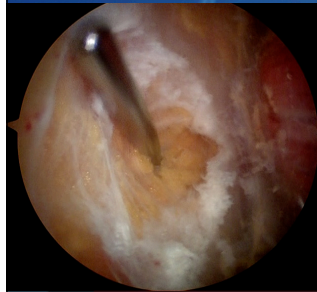


Lésions Associées =

Bursite

Trochantérienne

**Déchirure
GM & Gm**



Syndrome de la «coiffe» de la hanche +++

More often part of a Syndrome (Greater Trochanter Pain Syndrome)

Fascia Lata Retraction/ Trochanteric Bursitis / Gluteus Medius and Minimus tendon tears

Ressaut du TFL



Traitement :

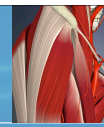
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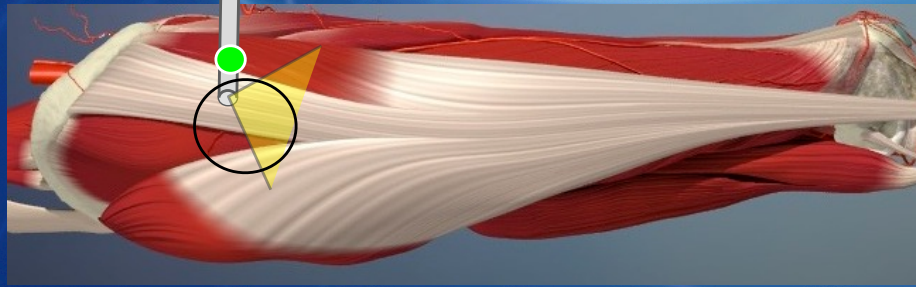


Pas ou Plus de douleur = Pas de chirurgie

Ressaut du TFL

Technique Arthroscopique

- ✓ Dec Latéral ou Dorsal
- ✓ Technique Inside Out
- ✓ Vue arthroscopique Antéro-supérieure



Section at the level of the Lesser Trochanter

Ressaut du TFL

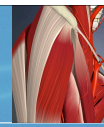
Technique Arthroscopique

- ✓ Dec Latéral ou Dorsal
- ✓ Technique Inside Out
- ✓ Vue arthroscopique Antéro-supérieure
- ✓ Abord instrumental inférieur



Section at the level of the Lesser Trochanter

Ressaut du TFL



Résultats

Excellent sur le Ressaut +++

Toujours Vérifier la «Coiffe» (Douleur)

