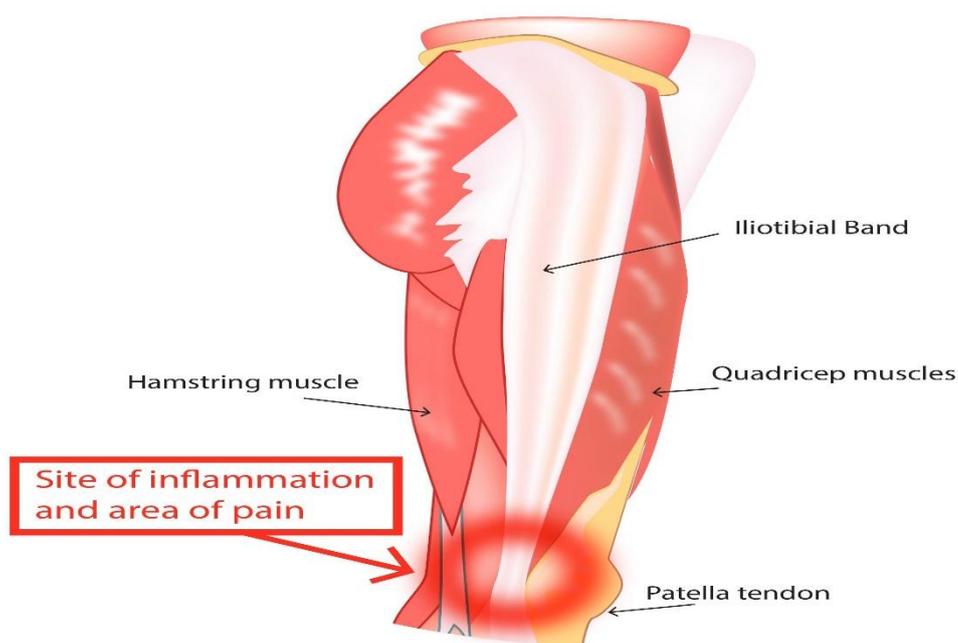


Iliotibial Band Syndrome (ITB Syndrome)



What is ITB Syndrome?

Iliotibial Band Syndrome (ITB Syndrome) is an overuse injury affecting the outside of the knee or hip.

The iliotibial band is a thick band of connective tissue running from the hip to the shin. When it becomes irritated due to friction or tension, it causes pain—particularly during running, walking downhill, or cycling.

Common Symptoms

- Pain on **outer side of the knee**, sometimes sharp or burning
- Pain worsens with:
 - Running (especially downhill or long distances)

- Walking downhill or long steps
 - Climbing stairs
 - Tenderness over the outside of the knee joint
 - Tightness along the outer thigh
 - Occasional outer-hip pain or snapping
 - Symptoms ease with rest but return on activity
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Common Causes & Risk Factors

- Overuse or sudden increase in running distance
 - Weak hip muscles (gluteus medius)
 - Poor running technique
 - Tight iliotibial band or tight hip muscles
 - Flat feet or over-pronation
 - Worn-out or inappropriate footwear
 - Running on banked/uneven surfaces
 - Cycling with incorrect seat height
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Diagnosis

ITB syndrome is usually diagnosed clinically through:

- Your symptoms
 - Physical examination
 - Tests to assess hip strength, knee alignment, and ITB tightness
Scans (MRI/ultrasound) are rarely needed unless symptoms persist.
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Self-Management and Treatment

1. Activity Modification

- Reduce running or aggravating activities temporarily
- Avoid downhill running or uneven surfaces

- Use cross-training: swimming, cycling (with correct setup), or walking on flat ground

2. Ice & Pain Relief

- Ice outer knee 10–15 minutes
- Over-the-counter pain relief (e.g., paracetamol or ibuprofen if appropriate)

3. Stretching

Perform daily:

- Iliotibial band stretch
- Gluteal stretch
- Hip flexor stretch
- Quadriceps and hamstring stretches

Hold each for 20–30 seconds, repeat 3–4 times.

4. Strengthening Exercises

Essential for long-term recovery:

- Side-lying leg raises
- Clamshells
- Hip abduction with resistance band
- Single-leg balance
- Step-downs
- Glute bridges

Build strength gradually.

5. Foam Rolling

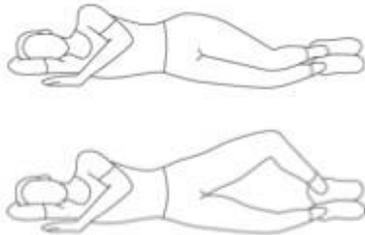
Rolling the outer thigh may reduce tightness.
(It may feel tender initially.)

6. Footwear & Orthotics

- Replace worn-out shoes
- Consider footwear assessment
- Insoles may help if you over-pronate

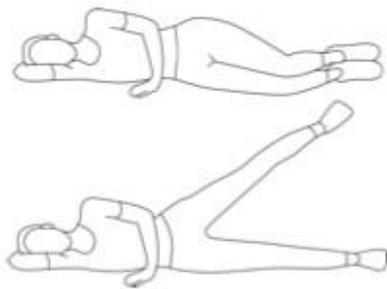
ITB Syndrome Exercises Handout

1. Clamshells



1. Lie on your side with your feet together and knees bent.
2. While keeping your feet together, slowly raise the top knee without moving your pelvis.
3. Perform 15 repetitions for 2-3 sets.
4. Repeat on the other side.
5. To increase resistance, use a resistance band.

2. Side lying hip abduction



1. Lie on your side with your legs stacked and straight.
2. Extend your bottom arm for support, and rest your head on it.
3. Keeping your top leg straight, slowly lift it upwards while keeping your bottom leg flat on the floor.
4. Perform 15 repetitions for 2-3 sets on each side.

3. Gluteal stretch



1. Lie on your back with your knees bent and feet on the floor.
2. Place one ankle on the opposite thigh (e.g., left ankle on right thigh).
3. Pull the knee towards the opposite shoulder.
4. Hold a gentle stretch for 30 seconds and repeat twice.
5. Switch sides and repeat.

When to Seek Further Help

See a healthcare professional if:

- Pain persists beyond 6–8 weeks despite self-care
 - Pain is worsening
 - You cannot continue training
 - The knee swells or locks (uncommon in ITB syndrome)
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Possible Clinical Treatments

- Physiotherapy (manual therapy, strengthening, training modification)
 - Gait/running analysis
 - Taping or bracing
 - Shockwave therapy (in specific cases)
 - Rarely an injection may be considered if symptoms are severe and persistent
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Prevention Tips

- Increase training gradually
- Warm up properly
- Include hip/glute strengthening in routine
- Avoid running on the same cambered surface
- Keep shoes in good condition
- Stretch after exercise