

IT BAND SYNDROME

Patient information: Iliotibial band syndrome (The Basics)[Written by the doctors and editors at UpToDate](#)

What is iliotibial band syndrome? — Iliotibial band syndrome is a condition that causes pain on the outside of the knee.

This condition involves a strong band of tissue called the “iliotibial band” ([figure 1](#)). The iliotibial band runs down the outside of the thigh, from the hip bone to the top of the shinbone.

Iliotibial band syndrome commonly happens in runners, especially after they increase their workouts.

What are the symptoms of iliotibial band syndrome? — Iliotibial band syndrome causes an aching, burning pain on the outside of the knee. The pain sometimes spreads up the thigh to the hip. The pain happens when people run (or do other physical activity).

For some people, the pain lasts even after they finish their workout. Movements that make the pain worse include going up and down stairs, and standing up from a seated position.

Will I need tests? — Probably not. Your doctor or nurse should be able to tell if you have this condition by learning about your symptoms and doing an exam.

How is iliotibial band syndrome treated? — Treatment usually involves a few parts.

The first part of treatment involves things you can do on your own to reduce your pain. To ease your symptoms, you can:

- Rest your knee and avoid activities or movements that make the pain worse.
- Put ice on the outside of your knee when it hurts or after activities that cause pain. You can put a cold gel pack, bag of ice, or bag of frozen vegetables on the painful area every 1 to 2 hours, for 15 minutes each time. Put a thin towel between the ice (or other cold object) and your skin.
- Take a pain-relieving medicine. Over-the-counter medicines include [acetaminophen](#) (sample brand name: Tylenol) or [ibuprofen](#) (sample brand names: Advil, Motrin).

Another part of treatment involves exercises to stretch and strengthen the muscles around your hip and knee. You can start these when your pain improves. Your doctor or nurse will show you which exercises and stretches to do. Or he or she will have you work with a physical therapist (exercise expert).

Can iliotibial band syndrome be prevented? — Yes. To help prevent getting iliotibial band syndrome again, you can:

- Replace your sneakers when they wear out.
- Run on even surfaces (and not on uneven surfaces).
- Run around a track in both directions (and not only in 1 direction).
- Ease up on your training and not run as far or as hard.

- Have an expert check how you run to make sure you run the correct way.

IT BAND REHAB EXERCISES FOR RUNNERS

Great Hip home exercises from @NikeRunning for runners or gluteus minimus/medius tendinopathy. <http://t.co/wmVZ7JT9D5>

The ITB Rehab Routine – Video Demonstration

by Jason Fitzgerald

The last major injury I had was a severe illiotibial band (IT Band) injury after the New York City Marathon in 2008. I took 9 days off from running after the race and then started to slowly run a little bit, only to have sharp pain on the outside of my left knee. I couldn't run for six months.

After seeing several physical therapists and spending countless hours researching the best treatment programs, I developed the ITB Rehab Routine. This strength protocol strengthens the glutes, hips, and quadriceps and allowed me to finally resume training after six months of inactivity.

Even though my IT Band injury has fully healed, I still do this routine because I think hip strength is very important to runners. New research shows that weak hips are to blame for lower leg injuries. More aggressive rehabilitation for IT Band injuries can be done in the gym with dead lifts and squats to strengthen the glutes, which are often weak in distance runners and the reason the IT Band can get inflamed.

Note that this routine is not a complete rehabilitation program for IT Band Syndrome. This is just one piece of the puzzle. For a step-by-step treatment protocol for ITBS, see Injury Prevention for Runners.

The ITB Rehab Routine consists of seven exercises done in a row with minimal rest. I do one set. Below is a demonstration of the exercises, using a Thera-Band. The video isn't perfect, but it works:

Lateral Leg Raises: lie on your right side with a theraband around your ankles. Lift your left leg to about 45 degrees in a controlled manner, then lower. I do 30 reps per side.

Clam Shells: lie on your right side with your knees together and a theraband around your lower thighs. Your thighs should be about 45 degrees from your body and your knees bent at 90 degrees. Open your legs like a clam shell but don't move your pelvis – the motion should not rock your torso or pelvic girdle. Keep it slow and controlled. I do 30 reps on each leg.

Hip Thrusts: lie on your back with your weight on your upper back your feet. Your legs will be bent at the knee. Lift one leg so your weight is all on one leg and your back. Lower your butt almost to the ground and thrust upward by activating your glutes. This exercise is great for glute strength and hip stability. I do 25 reps on each leg.

Side-Steps / Shuffle: with a theraband around your ankles and knees slightly bent, take ten steps laterally. The band should be tight enough so it provides constant resistance during all steps. Still facing the same direction, take another 10 steps back to your starting position. That is one set. I like to do 5 sets. This exercise will look like a slow-motion version of a basketball “defense” drill.

Pistol Squats: These are simply one-legged squats. The key to a successful pistol squat is to not lean forward, keep the motion slow and controlled, and make sure your knee does not collapse inward.

Hip Hikes: Stand on your right foot. With your pelvis in a neutral position, drop the left side so it is several inches below the right side of your pelvic bone. Activate your right hip muscle and lift your left side back to its neutral position. I do 20 reps per side.

Iron Cross: This dynamic stretch will help you feel loose after the previous strength exercises. Lie on your back with your arms out to your sides and swing your right leg over your torso and up to your left hand. Repeat with your left leg and do 20 reps in total.

After my experience paying \$30 to go to a physical therapist twice every week, this video is easily worth hundreds of dollars to the runner who applies it to their injury. If you use a foam roller for myofascial release after the routine, you are getting almost all of the benefits of a PT without the cost.

The only thing you need is a good Thera-Band.

A step-by-step treatment program for ITBS is also included in the Injury Prevention for Runners program.

Here are a few things to keep in mind when doing this strength routine:

If you currently have ITB pain, you can do this routine as often as every other day.

Always modify the number of reps or recovery period if you need to.

Even if you don't have ITBS, you can do this routine 1-2 times per week for prevention.

You can do this routine in addition to running (do it when you finish).

Increase reps or add weight to any exercise to increase its difficulty.

If you can't do pistol squats, here is a progression to get you there safely.

Get the low/medium resistance Thera-bands at first (or a combo pack so you can progress).