

# Chronic refractory adductor tendinitis treated with pelvic blocks/wedges for a sacroiliac joint sprain, myofascial release to hip joint capsule, and therapeutic exercises: A case report

Charles L Blum

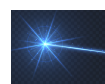
**Objective:** To explore chiropractic treatment of a patient with refractory adductor tendonitis.

**Clinical Features:** A 28-year-old female patient presented with a chronic left-adductor tendinitis unsuccessfully treated over 3-years with 2-tenotomy surgeries. At the first-office-visit she reported for years she was unable to walk over one-block without severe pain yet was visiting the United States with the goal of hiking in *Zion National Park*. She was assessed with a sacro-occipital technique category-two (sacroiliac joint sprain), reduced left-hip/thigh internal range of motion, posterior left-fibular head, and compensatory inversion left-calcaneal positioning.

**Intervention and Outcome:** Treatment was over 5-visits for 1-month. Deep tissue release to posterior left-hip joint capsule was performed, left fibular head was adjusted P/A, and left calcaneus was manipulated into a neutral position and supported with athletic tape. She was treated with supine category-two block placement which eliminated her chronic pubic bone adductor tendon insertion sensitivity. A modified *Pilates mermaid-pose* therapeutic exercise was performed multiple-times-a-day to increase her left-hip internal rotation. Following the 4<sup>th</sup>-visit she was hiking in *Zion* 6-8 miles a day without pain.

**Conclusion:** Further research is needed study what subsets of patients with adductor tendinitis might respond to this conservative chiropractic care.

**Indexing terms:** Chiropractic; adductor tendinitis; tenotomy surgery; sacro-occipital technique.



Charles L Blum

DC

[drcblum@aol.com](mailto:drcblum@aol.com)

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