A bursa, narrow and elongated in form, is usually found between the tendon and the capsule of the hip-joint; it occasionally communicates with the bursa between the tendon and the ischium.

MRI piriformis

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Excellent!

https://www.youtube.com/watch?v=eiCheyJl8f4

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Obturator internus stretch https://www.youtube.com/watch?v=Jlfkq5xEXS4&feature=youtu.be
Semi closed chain (for right leg; apparently same as Jason Onserud’s Jcoach below)
The sitting cross-legged reach forward stretch can help with piriformis syndrome, groin strain, tendonitis of the adductor muscles, snapping hip syndrome and trochanteric bursitis.
The cross-legged reach forward stretch decreases tension by stretching the gluteus maximus and the piriformis as well as the gemellus superior and inferior and the obturator internus and externus. These muscle connect the pelvis, hips and torso together.

*Don't ever under estimate the importance of stretching and the benefits it holds.*

![Sitting Cross-legged Reach Forward Stretch](image)

Whist doing this stretch is it important to be aware of the circulation in your legs. A lot of people find it uncomfortable to sit cross-legged because it interrupts the blood flow to the lower half of their legs, so it important to monitor this.

*The sitting cross-legged reach forward stretch can help with piriformis syndrome, groin strain, tendonitis of the adductor muscles, snapping hip syndrome and trochanteric bursitis.*

*Always remember* that while stretching may be recommended to aid recovery out of injury, you should always be very careful when stretching through rehabilitation. Your soft tissues are likely to be more vulnerable to re-injury if you stretch too much or too hard during this time. Always check with your Health Care Professional who is guiding you through your recovery to make sure it is appropriate to start stretching, and please - **ALWAYS FOLLOW THE RULES FOR SAFE STRETCHING** (The first posting on this stretching blog).

Image taken from "Lower Body Stretches" wall chart by B. Walker.

for left leg

https://www.youtube.com/watch?v=Y8VKY5PT0c8
Obturator internus bursitis MRI:  [http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2627277/](http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2627277/)


https://www.youtube.com/watch?v=cMQaYCpXM0
Calcific tendinitis results from deposition of calcium hydroxyapatite crystals in periarticular muscle attachments. Although involvement of tendons around the hip is not uncommon, gluteus medius and minimus tendons are rarely affected. We present endoscopic treatment of calcific tendonitis of gluteus medius and minimus and associated trochanteric bursitis in a patient with 2-year history of lateral hip pain. This is the first reported case treated using an endoscopic approach, which is effective and minimally invasive.

Also: Obturator internus tendinitis as a source of chronic hip pain.

Obturator internus

- Arises from the pelvic surface of the obturator membrane and the adjoining part of the hip bone.
- Muscle fibres from a tendon which exit the pelvis through lesser sciatic foramen and gets inserted on to the greater trochanter.

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http://www.anatomy.yalemedicine.org/Lab_12/Case_rez/case_2/m4.php
Side-lying obturator stretch: 12 inch box for foot & shoe in crotch: 12-15 seconds hold

https://www.youtube.com/watch?v=MvSHehrLBHk

Stretch front/back of thigh: quadriceps/hamstrings

http://orthoinfo.aaos.org/topic.cfm?topic=a00411