

The most obvious and commonly affected soft tissue structures that can be injured around the groin are the Adductors and the deep hip flexors. Both muscle groups are usually pulled or tweaked when the leg is over stretched out to the side or behind, or both, either too quickly or too fast with the adductors being more commonly injured than the hip flexors. The adductor muscle group consists of the adductor longus/brevis/magnus, pectineus and gracilis. Of these, the adductor longus is the most superficial and easiest to palpate. Along with the gracilis, it is also the most easily injured. An interesting feature of the origin of the adductor longus is that it has fibres that arise from the pubic rami bilaterally and above and below the symphysis pubis. They are responsible for stabilising the pelvis and moving the leg towards the midline of the body (adduction), and are particularly active during running – especially when changing direction, and kicking. This may be one possible explanation of the migratory and sometimes bilateral nature of the symptoms with adductor longus pathologies.

It is also important to focus on good core stability and strength in muscles stabilizing the pelvis.

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