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Longlasting adduction-related groin injuries in athletes; regular care or a novel treatment approach

Submission date	Recruitment status	[ ] Prospectively registered
19/07/2006	No longer recruiting	[ ] Protocol
Registration date	**Overall study status**	[ ] Statistical analysis plan
19/07/2006	Completed	[ ] Results
Last Edited	**Condition category**	[ ] Individual participant data
19/07/2006	Signs and Symptoms	[ ] Record updated in last year

Plain English summary of protocol
Not provided at time of registration

Contact information

Type(s)
Scientific

Contact name
Dr F. J. G. Backx

Contact details
Heidelberglaan 100
Utrecht
Netherlands
3584 CX
+31 (0)30 2501583
fbackx@umcutrecht.nl

Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers
7502.0005

Study information

Scientific Title

Acronym
LIES

Study objectives
Athletes with longstanding groin pain recover faster and more completely if they are treated with specific pelvic stabilizing muscle training compared with regular care.

Ethics approval required
Old ethics approval format

Ethics approval(s)
Not provided at time of registration

Study design
Randomised controlled, parallel group trial

Primary study design
Interventional

Secondary study design
Randomised controlled trial

Study setting(s)
Not specified

Study type(s)
Treatment

Participant information sheet

Health condition(s) or problem(s) studied
Groin pain

Interventions
Two different kinds of physiotherapeutic treatments are given for the population. Both treatment strategies are already in use in daily practice.
Patients are randomised to receive either pelvic-stabilizing muscle training or usual care

Intervention Type
Other

Phase
Not Specified

Primary outcome measure

1. Severity of the pain over the last three days (11-point visual analogue scale [VAS])
2. Participation in sports (11-point VAS-scale)
3. General disability (adapted Quebec low back pain disability scale)
4. Global change (six-point Likert scale)
5. How long before return to full athletic activity
6. Recurrences of the same complaints
Parameters 1, 2, 3 are measured before and directly after the period of treatment and 26 and 52 weeks after the start of treatment.
Parameters 4, 5 and 6 are only measured at 26 and 52 weeks after treatment.

Secondary outcome measures
1. Hip adduction strength (hand-held dynamometer);
2. Contraction pattern of the abdominal musculature (ultrasound echografie);
3. Active straight leg raise test (ASLR).

Overall study start date
01/03/2005

Completion date
15/08/2009

Eligibility

Key inclusion criteria
Male athletes, 18-45 years old, hip adduction-related complaints, for a period of at least six weeks, strong desire to compete in sports.

Participant type(s)
Patient

Age group
Adult

Lower age limit
18 Years

Upper age limit
45 Years

Sex
Male

Target number of participants
80

Key exclusion criteria
1. Pain as a result of high-impact trauma, suspicion of fracture, rupture of labrum of the hip, hip arthrosis or arthritis, femoral or inguinal hernia, radicular symptoms, infection of the urinary tract, bursitis, vessel disease, abnormal anatomy
2. Treated for the same (episode of) complaints previously, treated for low back pain with an

exercise program in the previous six months, systemic diseases
3. Psychopathology
4. Physical handicaps that make it impossible for the subject to take part of the study

Date of first enrolment
01/03/2005

Date of final enrolment
15/08/2009

Locations

Countries of recruitment
Netherlands

Study participating centre
Heidelberglaan 100
Utrecht
Netherlands
3584 CX

Sponsor information

Organisation
University Medical Center Utrecht (UMCU) (The Netherlands)

Sponsor details
P.O. Box 85500
Utrecht
Netherlands
3508 GA

Sponsor type
University/education

ROR
https://ror.org/0575yy874

Funder(s)

Funder type
Research organisation

Funder Name
Netherlands Organisation for Health Research and Development (ZonMw)

Alternative Name(s)
Netherlands Organisation for Health Research and Development

Funding Body Type
Private sector organisation

Funding Body Subtype
Other non-profit organizations

Location
Netherlands

Results and Publications

Publication and dissemination plan
Not provided at time of registration

Intention to publish date

Individual participant data (IPD) sharing plan

IPD sharing plan summary
Not provided at time of registration