What is the IT band?
The iliobial band (commonly known as the IT band) helps to keep your knee stable when you exercise. It is made out of strong fibres called connective tissue and runs from your pelvis down the outside of your leg into the outer part of your knee.

Why does IT band syndrome happen?
The IT band moves as you bend your knee during exercise. It can start to rub on the outer part of the knee causing pain if:
- your IT band is tight
- you have an uneven running style
- your hip muscles are weak
- you participate in particular activities, such as long distance running

IT band syndrome is common for people who do sports including:
- Running
- Cycling
- Jumping activities
- Field sports
- Hockey
- Rowing
- Breast stroke
- Hiking
- Basketball

Around 7-14% of runners get IT band syndrome

Using this leaflet
Your GP or physiotherapist can usually diagnose IT band syndrome based on your symptoms, pattern of exercise and an examination. They may give you this leaflet to help you understand more about your iliobial band, and what you can do to relieve your symptoms.

Suggested treatment for IT band syndrome

Modify activities
Consider reducing or changing activities for up to six weeks, to allow the inflammation to settle

You might need to modify activities for more or less than 6 weeks, depending on how bad your symptoms are

Try activities that don’t aggravate the pain, such as swimming, yoga, walking, or similar

Make sure to stretch
Improving strength around the hip is important to reduce the forces on the IT band. A physiotherapist may recommend using an elasticated band placed around the ankles and then performing leg movements. Lifting the leg sideways as shown 10 times, repeated 3-4 times a day, can improve pelvic muscle strength.

Start doing regular stretches:
- Stand upright and cross your affected leg behind your unaffected leg
- Lean away from the painful side until you feel a stretch and hold this position for 30 seconds
- Repeat this 4 more times
- Do these 3 times a day and continue until symptoms resolve

Gradually restart activities
As the pain allows, restart activities with reduced frequency and distance
- Try short sprints, which may avoid the repetitive irritation that occurs on longer runs
- Applying ice after a run, and simple painkillers such as paracetamol and ibuprofen can be helpful
- Avoid running on angled circuits, hard surfaces, and downhill
- Poorly fitting or inadequately padded footwear can make the condition worse so changing your footwear could be helpful
- Different footwear can be bought to correct foot posture and running style. Specialist assessment on a treadmill may help choose a better fitting shoe. This can also be assessed in some running shops

What happens if it doesn’t get better or happens again?
- About half of people can return to sport by 8 weeks
- This rises to 9 out of 10 at 6 months

If the advice in this leaflet doesn’t help, your GP may refer you to a specialist physiotherapist, sports medicine specialist or orthopaedic surgeon. There may be an underlying problem, such as a muscle imbalance, running technique or biomechanical issue

Evidence quality: low
There is not much good quality research about IT band syndrome, so this advice is mostly based on expert opinion

Source: Produced to accompany Iliotibial band syndrome (ITBS) by James Pegrum, Alex Self, and Nick Hall. Published in The BMJ, issue 364:8192 (23 Mar 2019). https://doi.org/10.1136/bmj.l980

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