Pes Anserine Bursitis

Inner knee pain that is not the joint

Tips from your physiotherapist at Ace Sports Medicine

ACE SPORTS MEDICINE
UPPER MOUNT GRAVATT

Pain on the inner side of the knee, a few centimetres below the joint line, worse on stairs and hills and often sore lying on your side at night, frequently comes from the pes anserinus, where three tendons attach to the shin with a small bursa underneath.

WHAT YOU SHOULD KNOW ABOUT PES ANSERINE BURSITIS

1 WHAT IT IS

Three tendons share one attachment on the inner shin, with a small cushioning bursa underneath. Irritation here causes pain just below the inner joint line.

A TENDON ATTACHMENT PROBLEM, CENTIMETRES FROM THE JOINT.

2 THE GREAT MIMIC

In a review of 509 MRI scans of painful knees, its commonest presentation was pain along the inner joint line mimicking a medial meniscal tear.

OFTEN MISTAKEN FOR A MENISCUS PROBLEM.

3 HOW OFTEN IT SHOWS

The same 509-scan review found pes anserine bursitis in about 2.5 percent of painful knee MRIs. Uncommon on scans, familiar in clinic.

SMALL NUMBERS, DISTINCTIVE STORY.

4 WHO GETS IT

Described as most common in middle-aged and older adults, particularly women, and frequently seen alongside knee osteoarthritis, higher body weight and type 2 diabetes.

OFTEN A COMPANION TO KNEE ARTHRITIS.

5 THE TWO-FINGER CHECK

Joint-line pain sits at the level of the knee crease. Pes anserine pain sits two to three finger-widths lower, on the flat inner shin, tender to press.

LOCATE THE SORE SPOT BEFORE ASSUMING THE JOINT.

6 WHAT HELPS

Conservative care first: load management, hamstring and hip-control work, graded strengthening, and simple measures such as a pillow between the knees at night.

OFTEN RESPONDS WELL TO TARGETED REHABILITATION.

BUT MY SCAN WAS CLEAR

That fits. The problem sits outside the joint, so a knee MRI can look normal or near-normal while the attachment stays tender. A clear scan with ongoing inner knee pain is a reason for assessment, not a dead end.

WHEN TO SEEK HELP

- Inner knee pain on stairs, hills or standing from a chair
- Night pain lying on your side
- Tenderness below the inner joint line
- A clear scan but a knee that still hurts
- Pain alongside known knee osteoarthritis
- A hot, swollen joint or fever needs prompt review

The last one is not this condition and needs same-day medical care.

WHAT CAN A PHYSIOTHERAPIST DO?

- Locate the true source of the pain
- Distinguish attachment pain from joint pain
- Manage load on stairs, hills and walking
- Strengthen hamstrings and hip control
- Add simple sleep and daily comfort measures
- Coordinate care alongside knee osteoarthritis

WHAT YOU CAN DO NOW

If the inner knee is talking to you, start here:

Do the two-finger check | **Trim stair and hill load briefly** | **Pillow between the knees at night** | **Book an assessment**

Please discuss specifics at an appointment. Most cases respond to conservative care.

Helping You Perform at Your Best

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Need support with inner knee pain?

Book your appointment today

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