

- > Antibiotics. If an infection is the source of your pain, your doctor may prescribe antibiotics.
- > Antidepressants. Some types of antidepressants can be helpful for chronic pain. Tricyclic antidepressants, such as amitriptyline, nortriptyline (Pamelor) and others, seem to have pain-relieving as well as antidepressant effects. They may help improve chronic pelvic pain even in women who don't have depression.

Other therapies

Your doctor may recommend specific therapies or procedures as a part of your treatment for chronic pelvic pain. These may include:

- Physical therapy. Stretching exercises, massage and other relaxation techniques may improve your chronic pelvic pain. A physical therapist can assist you with these therapies and help you develop coping strategies for the pain. Sometimes physical therapists target specific points of pain using a medical instrument called transcutaneous electrical nerve stimulation (TENS). TENS delivers electrical impulses to nearby nerve pathways. Physical therapists may also use a psychology technique called biofeedback, which helps you identify areas of tight muscles so that you can learn to relax those areas.
- Neurostimulation (spinal cord stimulation). This treatment involves implanting a device that blocks nerve pathways so that the pain signal can't reach the brain. It may be helpful, depending on the cause of your pelvic pain.
- Trigger point injections. If your doctor finds specific points where you feel pain, you may benefit from having a numbing medicine injected into those painful spots (trigger points). The medicine, usually a long-acting local anesthetic, can block pain and ease discomfort.
- Psychotherapy. If your pain could be intertwined with depression, sexual abuse, a personality disorder, a troubled marriage or a family crisis, you may find it helpful to talk with a psychologist or psychiatrist. There are different types of psychotherapy, such as cognitive behavioral therapy and biofeedback. Regardless of the underlying cause of your pain, psychotherapy can help you develop strategies for coping with the pain.

Surgery

To correct an underlying problem that causes chronic pelvic pain, your doctor may recommend a surgical procedure, such as:

- ⇒ Laparoscopic surgery. If you have endometriosis, doctors can remove the adhesions or endometrial tissue using laparoscopic surgery. During laparoscopic surgery, your surgeon inserts a slender viewing instrument (laparoscope) through a small incision near your navel

and inserts instruments to remove endometrial tissue through one or more additional small incisions.

- ⇒ Hysterectomy. In rare complicated cases, your doctors may recommend removal of your uterus (hysterectomy), fallopian tubes (salpingectomy) or ovaries (oophorectomy). There are important health consequences to having this procedure. Your doctor will discuss the benefits and risks in detail before recommending this option.

Pain rehabilitation programs

You may need to try a combination of treatment approaches before you find what works best for you. If appropriate, you might consider entering a pain rehabilitation program.

These types of programs, such as the Pain Rehabilitation Center, typically provide a team approach to treatment, including medical and psychiatric aspects.

Acupuncture

Limited evidence suggests that acupuncture may be helpful for some causes of pelvic pain.

During acupuncture treatment, a practitioner inserts tiny needles into your skin at precise points. Pain relief may come from the release of endorphins, your body's natural painkillers, but that's only one of many theories about how acupuncture works. Acupuncture is generally considered a safe treatment. Talk with your doctor if you're considering trying a complementary or alternative therapy.

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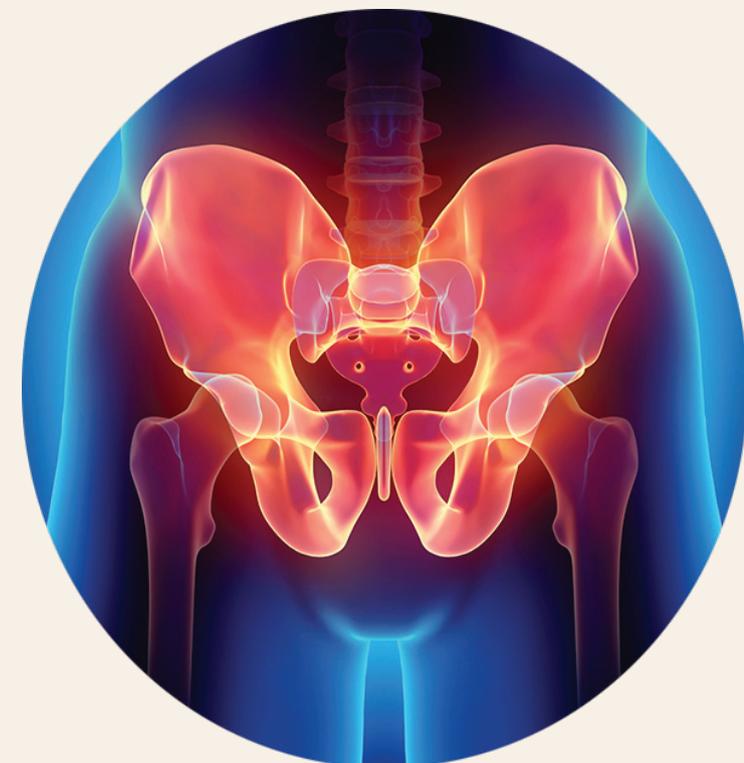
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CHRONIC PELVIC PAIN





What is chronic pelvic pain ?

Chronic pelvic pain is pain in the area below your bellybutton and between your hips that lasts six months or longer.

Chronic pelvic pain can have multiple causes. It can be a symptom of another disease, or it can be a condition in its own right.

If your chronic pelvic pain appears to be caused by another medical problem, treating that problem may be enough to eliminate your pain.

However, in many cases it's not possible to identify a single cause for chronic pelvic pain. In that case, the goal of treatment is to reduce your pain and other symptoms and improve your quality of life.

What causes chronic female pelvic pain?

Some common causes include:

- Problems of the reproductive system such as:
 - Endometriosis.
 - Adenomyosis.
 - Uterine fibroids.
 - Scar tissue (adhesions) in the pelvic area after an infection or surgery.
- Diseases of the urinary tract or bowel, such as:
 - Irritable bowel syndrome.
 - Chronic bladder irritation.
- Problems with the muscles, joints, and ligaments in the pelvis, lower back, or hips.

What is the cause?

Doctors don't really understand all the things that can cause chronic pelvic pain. So sometimes, even with a lot of testing, the cause remains a mystery. This doesn't mean that there isn't a cause or that your pain isn't real.

Sometimes, after a disease has been treated or an injury has healed, the affected nerves keep sending pain signals. This is called neuropathic pain. It may help explain why it can be so hard to find the cause of chronic pelvic pain.

Symptoms

When asked to locate your pain, you might sweep your hand over your entire pelvic area rather than point to a single spot. You might describe your chronic pelvic pain in one or more of the following ways:

- Severe and steady pain
- Pain that comes and goes (intermittent)
- Dull aching
- Sharp pains or cramping
- Pressure or heaviness deep within your pelvis

In addition, you may experience:

- Pain during intercourse
- Pain while having a bowel movement or urinating
- Pain when you sit for long periods of time



Your discomfort may intensify after standing for long periods and may be relieved when you lie down. The pain may be mild and annoying, or it may be so severe that you miss work, can't sleep and can't exercise.

When to see a doctor

With any chronic pain problem, it can be difficult to know when you should go to the doctor. In general, make an appointment with your doctor if your pelvic pain disrupts your daily life or if your symptoms seem to be getting worse.

What is the diagnosis of this condition :

Figuring out what's causing your chronic pelvic pain often involves a process of elimination because many different disorders can cause pelvic pain.

In addition to a detailed interview about your pain, your personal health history and your family history, your doctor may ask you to keep a journal of your pain and other symptoms.

Tests or exams your doctor might suggest include:

- Pelvic exam. This can reveal signs of infection, abnormal growths or tense pelvic floor muscles. Your doctor checks

for areas of tenderness. Let your doctor know if you feel any discomfort during this exam, especially if the pain is similar to the pain you've been experiencing.

- Lab tests. During the pelvic exam, your doctor may order labs to check for infections, such as chlamydia or gonorrhea. Your doctor may also order bloodwork to check your blood cell counts and urinalysis to check for a urinary tract infection.
- Ultrasound. This test uses high-frequency sound waves to produce precise images of structures within your body. This procedure is especially useful for detecting masses or cysts in the ovaries, uterus or fallopian tubes.
- Other imaging tests. Your doctor may recommend abdominal X-rays, computerized tomography (CT) scans or magnetic resonance imaging (MRI) to help detect abnormal structures or growths.
- Laparoscopy. During this surgical procedure, your doctor makes a small incision in your abdomen and inserts a thin tube attached to a small camera (laparoscope). The laparoscope allows your doctor to view your pelvic organs and check for abnormal tissues or signs of infection. This procedure is especially useful in detecting endometriosis and chronic pelvic inflammatory disease.

Finding the underlying cause of chronic pelvic pain can be a long process, and in some cases, a clear explanation may never be found.

With patience and open communication, however, you and your doctor can develop a treatment plan that helps you live a full life with minimal discomfort.

The goal of treatment is to reduce symptoms and improve quality of life.

If your doctor can pinpoint a specific cause, treatment will focus on that cause. However, if a cause can't be identified, treatment will focus on managing your pain and other symptoms. For many women, the optimal approach involves a combination of treatments.

Medications

Depending on the cause, your doctor may recommend a number of medications to treat your condition, such as:

- Pain relievers. Over-the-counter pain remedies, such as aspirin, ibuprofen (Advil, Motrin IB, others) or acetaminophen (Tylenol, others), may provide partial relief from your pelvic pain. Sometimes a prescription pain reliever may be necessary. Pain medication alone, however, rarely solves the problem of chronic pain.
- Hormone treatments. Some women find that the days when they have pelvic pain may coincide with a particular phase of their menstrual cycle and the hormonal changes that control ovulation and menstruation. When this is the case, birth control pills or other hormonal medications may help relieve pelvic pain.