

THE EFFICACY OF OPD BASED-PUDENDAL NERVE BLOCK IN THE TREATMENT OF CHRONIC PELVIC PAIN.

Hypothesis / aims of study

To determine the effect of OPD(out-patient department) based-pudendal nerve block in patients with chronic pelvic pain.

Study design, materials and methods

We performed a retrospective analysis of 18 patients with refractory chronic pelvic pain. Pudendal nerve block was performed in chronic pelvic pain patients that subjective pain scale did not decrease by more than 30% despite of various medications for more than 2 months (NSAIDs, TCA, opioids, antibiotics including quinolone, α -blocker and pentosane polysulphate). Patients with anatomical abnormality, gynecological problems, or infections were excluded.

An OPD-based transvaginal pudendal nerve block targets the pudendal trunk as it enters the lesser sciatic foramen, about 1cm inferior and medial to the attachment of the sacrospinous ligament to the ischial spine in the lithotomy position. Using a 15cm/25gauge spinal needle with a plastic guard, total 10cc of 2% lidocaine was injected in bilateral pudendal nerve. Vital sign was checked pre and post treatment status and 1hr after treatment. The change of subjective pain scale, reduction of medication, improvement of other symptoms were analysed at post- block 3months. The chi-square test and paired t-test were used. All analyses performed with SPSS v23.0

Results

Mean age of patients was 43 years (31-58). Before the nerve block, the mean duration of medication was 3.8 months. 13/18 (72.2%) patients were accompanied by peri-pudendal tenderness and surrounding trigger points. 12 (66.7%) patients received nerve block once, 6(33.3%) patients received twice, with an interval of 2 weeks (n=4), 1.5month (n=2). 15 patients (83.3%) that received pudendal block reported improvement in pelvic pain including dysuria and dyspareunia post procedure (p<0.003). 8/15 (4.4%) patients showed improvement of frequency and urgency. In total, 12/18 (66.7%) patients could reduce (n=7) or stop (n=3) the medication. There is no adverse effect except one case of UTI.

Interpretation of results

OPD based-pudendal nerve block reduced chronic pelvic pain without severe side effect.

Concluding message

The use of OPD based-pudendal nerve block is feasible and safe and also associated with an overall improvement in chronic pelvic pain.

References

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Disclosures

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