

WHAT TO EXPECT AT WHRIA FOR PELVIC PAIN

At WHRIA we have a large team of experienced clinicians specialising in different aspects of pelvic pain. We are compassionate, enthusiastic, informed, and experienced in pelvic pain. You may choose to see any of the WHRIA practitioners first according to your needs and your discussion with your GP. Persistent pelvic pain can affect all areas of your life as well as other areas of your body and it is often difficult finding out how and where the cycle began. All of the WHRIA team are trained to recognise when you may also benefit from one or more of our other services, for the best outcome and most efficient path to health for you. We can help you identify your goals and develop a plan to achieve them.

YOUR FIRST APPOINTMENT AT WHRIA

When you have persistent pelvic pain it is common to have seen many practitioners. Four questions are useful to ask to ensure you have found the right person or team for you (Butler & Moseley, 2013):

1. What is wrong with me?
2. How long will it take?
3. What can I do for my pain?
4. What can you do for me?

WHAT IS WRONG WITH ME?

At WHRIA we will do our very best to try to find out what is wrong with you. We have a large team at WHRIA with a very broad expertise in the many, often complex aspects of pelvic pain. We meet regularly to discuss, learn and share ideas. WHRIA Diagnostics provides in-house diagnosis and we work closely with a broad external network of trusted, experienced specialists that you may also be asked to see to get to the bottom of your problem. We admit medicine and science does not always have all the answers and our team are curious about new ideas, striving to find new solutions in diagnosis and treatment. These ideas are then tested via research and implemented back into our practice with a view to continually improving the care you receive.

At WHRIA we recognise that it is your body and mind and therefore your **individual** pain. We live in an age of freely available information and understand that often you have sought and been through a lot of investigation. We recognise the importance of **listening to your story** and what **you** think is happening. To 'unravel' the complex puzzle of persistent pelvic pain it can be helpful to think about the following questions, in preparation for your first appointment with any of the WHRIA team (M. K. Nicholas & Linton, 2008):

- What do you think is happening in your body when you feel your pain?
- What have you stopped in your life because of your pain?
- What are your goals?

- When is your pain better or worse?
 - What do you usually do?
- When do you take your pain medication?

THE PIECES OF YOUR PAIN PUZZLE.

Persistent pain is often a build-up of many small factors over your life, and often some large factors that contribute to your pain. Your lifestyle, work, home, social, medical and mental health story are all equally important.

Your practitioner will ask you questions in relation to all these aspects, and while these may not **seem** relevant to your pain today, they are often large contributing and maintaining factors that can be managed. For example years of straining with constipation can contribute to chronic tension in your muscles and connective tissues (fascia) of your abdomen; daily 'irritation' to the pudendal nerve as well as all the digestive issues that comes with constipation. An example of a large contributing factor may be fall or a difficult birthing.

Mental fitness plays a huge role in our **response** to pain, often called 'secondary suffering'. You will be asked to fill in questionnaires that will help us determine if you need some help in this area. These include you pain levels; stress and anxiety; thoughts and beliefs and your coping style (M. Nicholas, Linton, Watson, & Main, 2011). There are many avenues of help available at WHRIA and self-help for this aspect of your pain. See "What can I do for My Pain" below.

HOW LONG WILL IT TAKE TO ACHIEVE MY GOALS?

This is a very good question and any answer given can only be an estimate based on how much we know today about your pain, in comparison to the 'average' recovery time to a more functional lifestyle. Often this is very difficult to estimate as so many factors are involved and everyone's pain is an **individual** experience, and comparisons are fraught with difficulty. WHRIA's experienced pelvic pain clinicians will do their very best to estimate, and with time this can be refined as we get to know you and your pain.

It is important to make goals that both you and your clinician understand. Aim for physical, social and work/home goals, which allow your progress to be measured. Your sex life is also a very important aspect to think about in your goals.

WHAT CAN I DO FOR MY PAIN AND WHAT CAN WHRIA DO FOR ME?

The concept of primary and secondary suffering helps guide us in what **you** can do and what **we**, at WHRIA can do for your pain.

Primary suffering is thought to be the original 'cause' or precipitating factor/s; or ongoing contributing factors that are difficult for you as an individual to influence: that's where WHRIA can help.

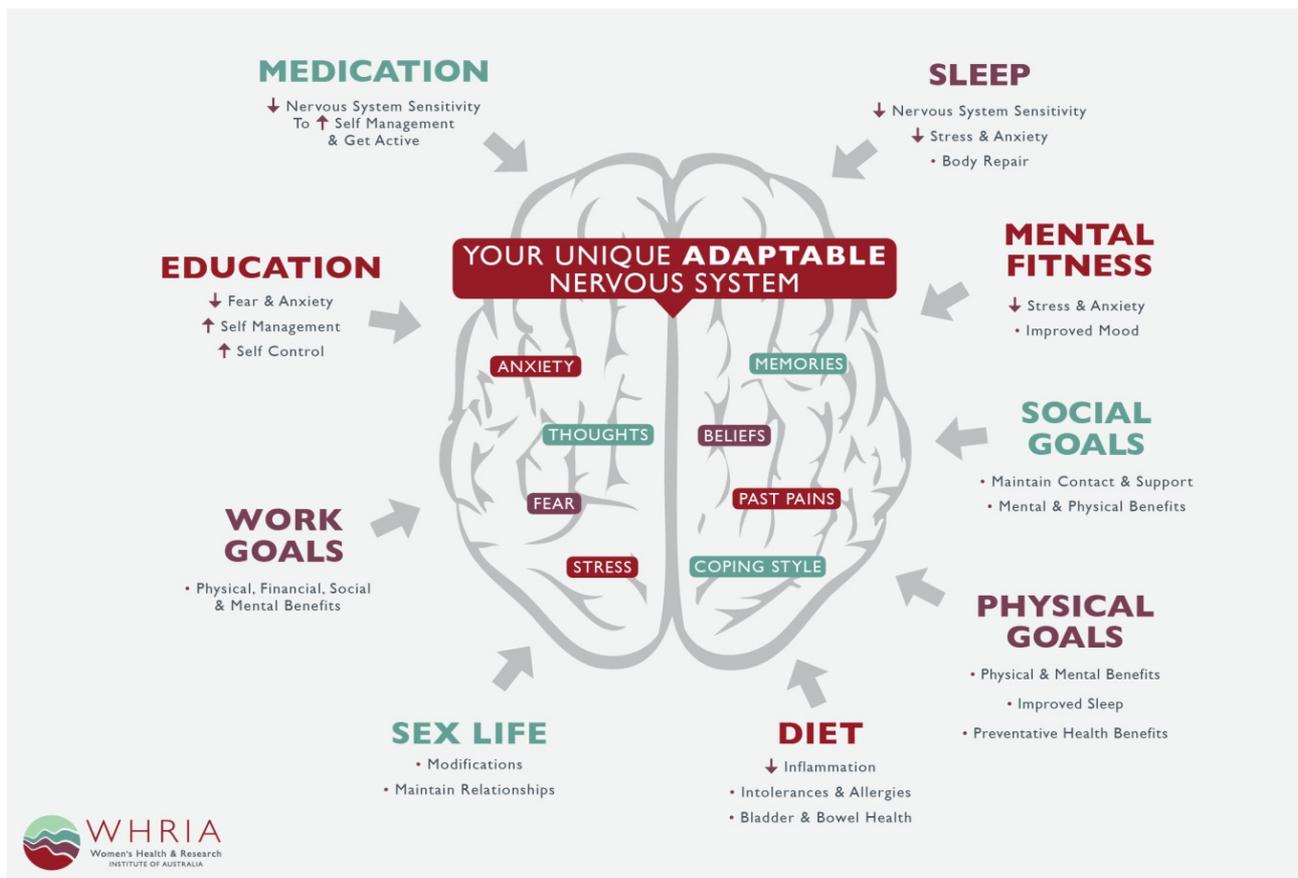
Secondary suffering is thought to be the way you **react** to your pain, both in your body and mind. This is an area where you have great potential to influence your pain and improve your daily life. Psychology, hypnotherapy, counselling, pain education, and pelvic pain support groups are some of the services at WHRIA that can help you modify your secondary suffering.



WHAT CAN I DO FOR MY PELVIC PAIN?

New research has shown us just how much of our everyday life, thoughts and reactions can influence our nervous system and therefore our perception of pain. Neuroplasticity is the ability of your nervous system to **change** according to the 'inputs' and it can be used as an important tool to make a big change in the way we think about, react to and 'feel' our pain (Flor, 2012).

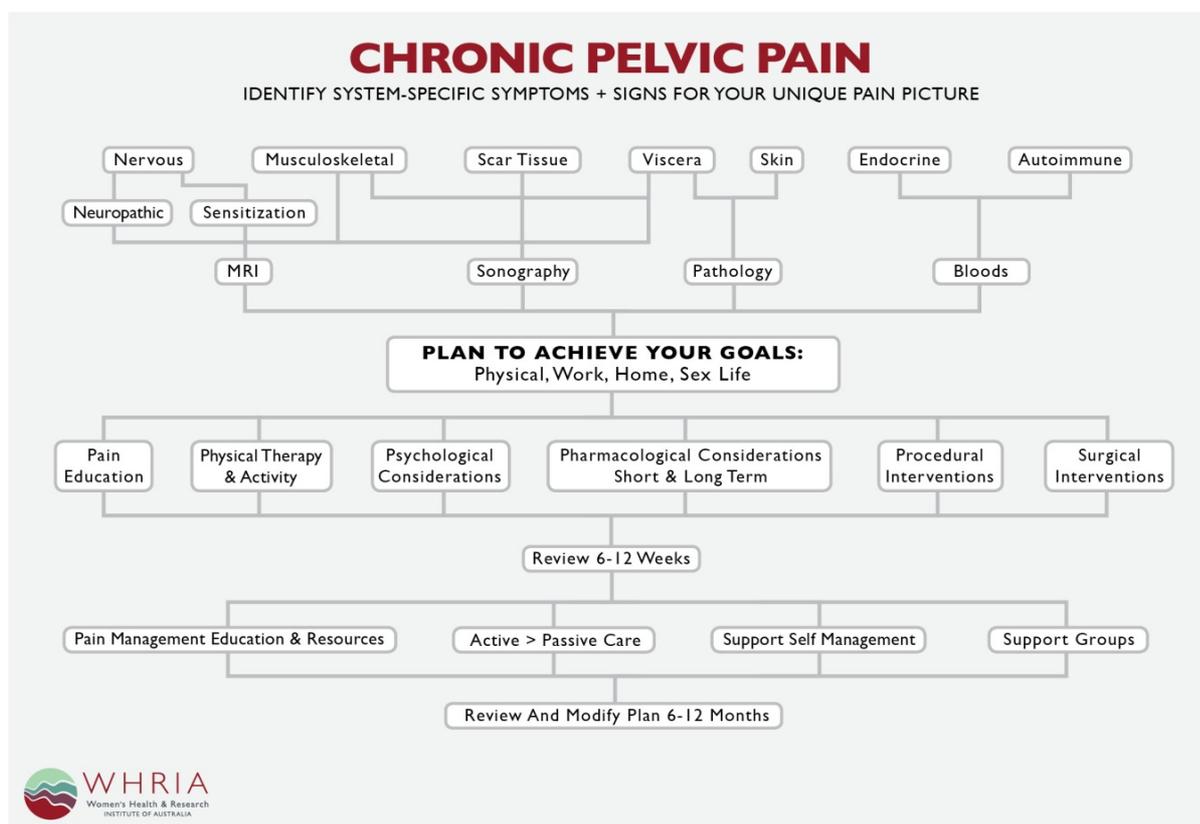
You are in the driving seat: take control of your pain (Butler & Moseley, 2013).



WHAT CAN WHRIA DO FOR MY PELVIC PAIN?

All of our services are centred on you and your physical, social and work, home and sex life goals. Education is a major part of all our services at WHRIA, as you will be better informed and in control if you understand the science behind your pain state. It is also important that you understand any prescribed help. Ask for appropriate scientific evidence supporting what is offered to you (Butler & Moseley, 2013).

The WHRIA team aim to support you in making the right decisions towards regaining your function and life. We offer a one-on-one service in Pain Education that can be very useful to help you understand your particular problem in more detail and develop a realistic plan to achieving your goals. WHRIA also offers small group pelvic pain management classes. Please register your interest for the next available class via support@whria.com.au



The WHRIA team meet regularly to discuss your progress and communicate via your notes so that everyone is kept up to date. A long term follow up with your Pain Medicine specialist is recommended each 6-12 months to discuss and modify your plan according to evidence-based treatments as more options become available (Engeler et al., 2013).

THE WHRIA TEAM

Professor Thierry Vancaillie and Dr Jason Chow are the 'conductors' of our WHRIA 'orchestral' team and most people will book in for a thorough initial assessment from a **Pain Medicine** and **Gynaecology** perspective. Conservative treatments are usually trialled for a period before interventional procedures are introduced (Engeler et al., 2013; Fall et al., 2004).

If you have had pain for a while it is likely your **pelvic floor muscles** have tightened in response to the pain, and often you will also need to see Sherin Jarvis, our pelvic floor physiotherapist. Advice for your bladder and bowel is included as a part of pelvic floor education. TENS machines are also an option for pain modulation.

Manual therapy with one of our osteopaths, Amy Corcoran or Liz Howard can help if you have **musculoskeletal** issues such as low back, hip or sacro-iliac joint (SIJ) pain, walking or postural problems. Your body is unique to you and osteopathy can tailor a 'tune-up' specific to your biomechanics. People find this very useful as a self-management tool, to understand why their pain is triggered if they do certain things. Other aches and pains can develop because of your pelvic pain and osteopathy can help to address this.

Acupuncture & herbal medicine with Bernice Lowe is especially useful if **your pain began within the last year**, is associated with your menstrual **cycle**, is associated with having a baby, you are pregnant or trying to conceive.

Psychology, hypnotherapy and counselling with Margaret O'Brien are offered for help in self-managing your stress, anxiety, and unhelpful thoughts and beliefs; particularly if these are noted on your initial **mental fitness** questionnaires.

In addition to general **gynaecology**, Dr Yasmin Tan specialises in vulval **skin** health and management, which can be a large contributor to pelvic pain and painful sex.

Assoc. Professor John Eden is a gynaecologist and reproductive endocrinologist and can help if your **hormones** are contributing to your pain. Some symptoms of this may be cyclic pain, bloating, and mood disturbances associated with your pain.

Pain Education is offered individually and as a group. Elizabeth Howard is an osteopath with many years of experience in the education and treatment of contributors to pelvic pain and she will complete a Master of Science in Medicine (Pain Management) at the University of Sydney in late 2015. With the appropriate level of cover, your private health insurance can provide a rebate for this service. You may also be eligible for a Medicare rebate for five allied health services per year via the Chronic Disease Management Plan (CDMP) if you have had pain for more than six months. Discuss this option with your GP.

Interventional procedures available at WHRIA include injections, pulsed radio frequency (PRF) and laser treatments. **Surgical procedures** available at WHRIA include gynaecological surgery, neuromodulation implantation, and pudendal nerve release surgery.

Speak to your practitioner or see the Health Information section of the WHRIA website (News & Resources) for more information.

HOW DO I MAINTAIN THE BENEFITS?

WHRIA understands that it is often difficult to keep up with new information and maintain your progress in today's busy lifestyle. It is important to develop support networks within your home, work and social circles that can help with this. It helps if your partner and family also understand the neurobiology behind your pain and what **your individual management plan** is, and we encourage family members to attend appointments and information sessions with you. This can help avoid the awkward experience of well-meaning but ill-informed advice

Pelvic pain can be very isolating. It is very common to be embarrassed to talk about intimate problems with family or friends, or often the listener is too embarrassed to hear about it. WHRIA offers a pelvic pain **Pudendal Neuralgia Support Group** gathering as a chance to meet others with PN and learn about self-management, advances in treatments and management. Pain Educator Elizabeth Howard and our group founder and volunteer Anjoli Sprangers are trained facilitators with APMA (Australian Pain Management Association). We encourage you to become a member of APMA and utilise their wonderful resources for pain self-management. Guest speakers from WHRIA and the broader pain community discuss such topics as: hypnotherapy for pain management; advances in neuromodulation; mindfulness meditation; understanding a flare. If you are interested in speaking at a meeting please contact us on support@whria.com.au or you would like to join the mailing list for notifications of meetings.

There are many fabulous resources for persistent pain on line and in the community. The Pain Management Network has videos, up to date information and links to support networks. Also see our News & Resources section of the WHRIA website for recommended books, videos, podcasts, information sheets and more.

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