ASC GYNAECOLOGY

PUDENDAL NERVE BLOCKS FOR THE TREATMENT OF VULVODYNIA

Vulvodynia
Vulvodynia is one of the most severe forms of nerve or neuropathic pain. Women suffering from vulvodynia may experience sharp, burning or electric shock-like pain that can occur around the vulva, labia or entrance to the vagina. Researchers generally agree that nerve injury or irritation is prevalent in most cases. The pudendal nerve is the main nerve that runs through this area, so more advanced treatment for nerve pain is targeted here.

Nerve Blocks
Often a group of nerves that cause pain to a specific organ or body region can be blocked with the injection of medication into a specific area of the body. The injection of this nerve-numbing substance is called a nerve block.

If the vulvodynia is not responding to conservative treatment, such as anti-neuropathic medication, a nerve block is worth considering. This is not an invasive technique, but one where local anaesthetic and a steroid is injected into the muscle/ligament in the region where the dysfunctional nerve passes through the muscles. The anaesthetic immediately dulls the pain, providing instant relief to the patient. The cortisone will then kick in at a very slow rate, soothing the nerves and inflammation.

Procedure
All the aspects of the procedure are clearly explained to the patient, along with the possible risks and side effects. A consent form is signed to confirm approval. Where required, the patient's medical history will also be discussed to ensure that no adverse factors are present.

After the patient has taken their position, patients are given an intravenous sedation to ensure the procedure is pain-free and easy to tolerate. Upon completion, the area to be injected is cleaned with a sterile scrub. Via a transvaginal approach, the physician will then insert a needle through the skin and deeper tissues. The injection contains a mixture of local anaesthetic and cortisone (a steroid). The patient will then be monitored for a minimum of 30 minutes after the procedure is over and will then be allowed to return home.

Outcome
After a week there is often a very significant reduction in pain, with up to 80% of patients feeling better.

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