

New IR Strategies in Management of Chronic Pelvic Pain

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Background. Chronic pelvic pain (CPP) represents a group of complex disorders defined as nonmalignant pain in the pelvis perceived by either men or women. CPP has historically been refractory to conventional treatment modalities, and referral to pain management typically occurs at later stages of disease severity. The common neuropathic symptoms of CPP include paresthesias, numbness, burning, or lancinating pain. Emerging research has shown that Botulinum toxin A injection of pelvic floor muscles may be a useful therapy for CPP that fails to respond to conservative management. This exhibit reviews the pathophysiological mechanisms underlying CPP and the techniques, effectiveness, and complications of pelvic floor injections utilized by interventional radiologists to manage refractory CPP.

Methods. Systematic review of the workup and management of chronic pelvic pain with emerging IR techniques was undertaken with emphasis on the pathophysiology of chronic pelvic pain from both overrelaxation and high-tone dysfunction and treatment techniques. A review of pelvic floor imaging techniques, with particular focus on dynamic MRI and ultrasound, and treatment techniques encompassing both conservative management and interventional procedures was completed.

Conclusion. Chronic pelvic pain (CPP) is a poorly understood condition of the adult population that significantly impacts quality of life. Physical therapy (PT) remains the mainstay of conservative therapy; however, many cases of CPP remain refractory to PT and other noninvasive modalities. Moreover, there is a lack of rigorous data on the effectiveness of traditional therapies. With minimally invasive techniques becoming increasingly available, more definitive treatment is appropriate for a broader patient population. The pathophysiology, diagnostic criteria, imaging, and management of chronic pelvic pain are relevant and informative topics for radiologists-in-training, as well as interested providers and students.