

Outpatient Pelvic Nerve and Muscle Treatment Reduces Pain and Improves Functionality for Patients with Chronic Pelvic Pain and Erectile Dysfunction

Authors : Allyson Augusta Shrikhande, Alexa Rains, Tayyaba Ahmed, Marjorie Mamsaang, Rakhi Vyas, Janaki Natarajan, Erika Moody, Christian Reutter, Kimberlee Leishear, Yogita Tailor, Sandra Sandhu-Restaino, Lora Liu, Neha James, Rosemarie Filart

Abstract : Characterized by consistent difficulty getting and keeping an erection firm enough for intercourse, Erectile Dysfunction may affect up to 15% of adult men. Although awareness and access to treatment have improved in recent years, many patients do not actively seek diagnosis or treatment due to the stigma surrounding this condition. Patients who do seek treatment are often dissatisfied by the efficacy of the medication. The condition inhibits patients' quality of life by worsening mental health and relationships. The purpose of this study was to test the effectiveness of an outpatient neuromuscular treatment protocol in treating the symptoms of Chronic Pelvic Pain and Erectile Dysfunction, improving pain and function. 56 patients ages 20-79 presented to an outpatient clinic for treatment of pelvic pain and Erectile Dysfunction symptoms. These symptoms had persisted for an average of 4 years. All patients underwent external ultrasound-guided hydro-dissection technique targeted at pelvic peripheral nerves in combination with pelvic floor musculature trigger-point injections. To measure the effects of this treatment, a five question Erectile Dysfunction questionnaire was completed by each patient at their first visit to a clinic and three months after treatment began. Answers were summed for a total score of 5-25, with a higher score indicating optimal function. The average score before treatment was 14.125 (SD 5.411) ($\alpha=0.05$; CI 12.708-15.542), which increased by 18% to an average of 16.625 (SD 6.423) ($\alpha=0.05$; CI 14.943-18.307) after treatment ($P=0.0004$). Secondary outcome variables included a Visual Analogue Scale (VAS) to measure pelvic pain intensity and the Functional Pelvic Pain Scale (FPPS) to measure function across multiple areas. VAS scores reduced by 51% after three months. Before treatment, the mean VAS score was 5.87, and the posttreatment mean VAS score was 2.89. Pelvic pain functionality improved by 34% after three months. Pretreatment FPPS scores averaged at 7.48, decreasing to 4.91 after treatment. These results indicate that this unique treatment was very effective at relieving pain and increasing function for patients with Erectile Dysfunction.

Keywords : chronic pelvic pain, erectile dysfunction, nonsurgical, outpatient, trigger point injections

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