

# Chronic Pelvic Pain - CPP

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## Introduction

**Chronic pelvic pain** Chronic pelvic pain refers to any pain that lasts six months or longer in your pelvic region. Pelvic region is the area below your navel and between your hips. The pain is more generalized over the area rather than localized. This form of pain can be diagnosed as a condition on its own or be associated with a pathology in the pelvic area.

The cause of CPP can be very difficult to determine and can lead to frustration for individuals who suffer from CPP. Surprisingly, no physical cause may ever be discovered. According to statistics, as many as 61% of women who experience CPP never receive a specific diagnosis.

## Signs and symptoms

Chronic pelvic pain exhibits many different characteristics. Some of the signs and symptoms are:

- \* Severe and steady pain
- \* Intermittent Pain (pain that comes and goes)
- \* Dull/ achy
- \* Pressure or heaviness deep within your pelvis

In addition, you may experience pain when you are sitting, while having a bowel movement and even during sexual intercourse. Prolonged standing may intensify the pain while sitting down may relieve it. The pain can become intolerable to the point of affecting your day to day activities. It can vary from mild to severe, from annoying to disabling. CPP can also contribute to back pain.

## Causes

Several gynecologic problems may be the source of chronic pelvic pain. Some of the more common causes of chronic pelvic pain include:

\* Endometriosis. This is a condition in which tissue from your uterine lining (endometrium) grows outside your uterus. These deposits of tissue respond to your menstrual cycle, just as your uterine lining does &mdash; thickening, breaking down and bleeding each month as your hormone levels rise and fall. Because it's happening outside your uterus, the blood and tissue can't exit your body through the vagina and become trapped in your abdomen. This can lead to painful cysts and adhesions.

\* Tension in your pelvic floor muscles. Spasms of the pelvic floor muscles can lead to recurring pelvic pain.

\* Chronic pelvic inflammatory disease. This can occur if a long-term infection, often sexually transmitted, causes your fallopian tubes to scar and adhere to your ovaries.

\* Pelvic congestion syndrome. This is a condition that may be caused by enlarged, varicose-type veins around the ovaries. These veins cause blood to pool in your ovaries and pelvic area.

\* Ovarian remnant. During a complete hysterectomy &mdash; surgical removal of the uterus and ovaries &mdash; a small piece of ovary may be left inside, which can later develop tiny, painful cysts.

\* Fibroids. These noncancerous uterine growths may cause pressure or a feeling of heaviness in your lower abdomen. They rarely cause sharp (acute) pain unless they become deprived of nutrients and begin to die (degenerate).

\* Irritable bowel syndrome. Symptoms associated with irritable bowel syndrome &mdash; bloating, constipation or diarrhea &mdash; can be a source of uncomfortable pelvic pain and pressure.

\* Interstitial cystitis. Chronic inflammation of the bladder and a more frequent need to urinate characterizes interstitial cystitis. You may experience pelvic pain as your bladder fills, which may improve after emptying your bladder.

\* Psychological factors. If you are depressed, are under excessive stress or have been sexually or physically abused, you may be more likely to experience chronic pelvic pain. That's because emotional distress makes pain worse, possibly by causing you to unknowingly contract your pelvic floor muscles or by causing chemical changes that affect your ability to cope with pain.

## Massage Therapy and Pelvic Pain

Most women have suffered from pelvic pain for decades. Medications are prescribed to related pathologies such as endometriosis, fibroid pain, ovarian cysts and cervical cancer. Recently studies have shown positive results from massage therapy. Since direct contact and tissue manipulation in the pelvic region is NOT an RMT's scope of practice, there are other indirect, therapeutical techniques that have positive results such as decreased pain, increased range of motion, scar tissue breakdown, adhesion release, increased blood circulation and painfree sexual intercourse. Trigger point release techniques and hydrotherapy are included in your treatment plan. RMTs educate individuals to be able to manage their pain on a daily basis in order to relieve them from taking painkillers. Clients are highly recommended to get massage therapy as an alternative form of healthcare and an ongoing maintenance plan.