Understanding Chronic Pelvic Pain and Vulvodynia

Chronic pelvic pain (CPP) is defined as any pelvic pain that continues for more than six months. The pain of CPP originates in the lower abdomen and pelvis, although it may extend downwards to involve the lower legs or upwards to the chest area. Pain can be intermittent or continual in duration and change in relation to physical and mental fatigue, depression and anxiety; and interruptions in sleep. Rectal itching and burning on when having a bowel movements associated with irritable bowel syndrome (IBS) are other typical symptoms. CPP can occur in men and women.

The term vulvodynia means pain or discomfort at the entranceway to the vagina. The vulva is the external genitalia in women. The skin of the vulva can be quite sensitive. Because it is moist and frequently subjected to friction while sitting and moving, this area can be easily injured. Vulvodynia that has persisted for more than six months has more in common with CPP than with other gynecologic disorders. Unexplained vulvar pain is frequently accompanied by physical disabilities, limitation of daily activities (such as sitting and walking), sexual dysfunction and psychologic disability.

Other medical conditions that may present as chronic pelvic pain syndrome include interstitial cystitis, overactive bladder (OAB), and urethral syndrome.

Common Symptoms
Symptoms include:

Women
- Low back pain
- Heavy feeling in the pelvic
- Radiating leg pain
- Pain with urination and/or bowel movements
- Bowel complaints such as constipation or diarrhea
- Suprapubic (over your bladder) pain
- Coccyx pain
- Stomach pain or bloating
- Irregular menstrual cycle
- Pain with menses
- Painful sex causing decreased sexual activity

Men
- Pain in the scrotal, perineal, inguinal and bladder areas
- Pain with ejaculation and/or bowel movements

Pain Triggers

Certain activities can trigger pain and they include:
- Changes in position
- Prolonged sitting or standing
- Physical activity such as exercise