

ASK ESIG

Know the right stuff with ESIG

Empowerment through expertise

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PSYCHOLOGICAL TOOLS FOR MANAGING PELVIC PAIN

QUESTION 1: I have read the ASK ESIG files on pain following surgery (<http://www.nzendo.org.nz/media/65425/ask-esig-january-2017.pdf>) but seriously, with a history of endometriosis and adenomyosis, what can I do to ease the ongoing pain?

Hannah Blakely: A team approach to pain management is the most effective in response to this question. A Clinical Psychologist may be useful to approach management of chronic pelvic pain in the context of ongoing management of pelvic pain. For example, many women experience persistent pelvic pain when the assumed source or reason for pain is surgically removed or medically managed. Often women express their distress, frustration and anxiety that pain remains feeling ‘over it’ and describe how it may negatively impact on their daily functioning. It may impact on mood, (low mood/depression and/or anxiety tolerance of pain, concentration and attention, physical activity, relationships sexual intimacy).

A common question is ‘how do I cope with living with this pain’. There are a number of effective management approaches including gaining the skills to tolerate and “turn the intensity of pain down”, finding out more about the psychological process of pain and how pain operates and learning about the meaning of pain to you. People perceive their pain differently. Some might think of it as harmful, unpredictable and uncontrollable. So, the way we perceive pain can affect our response to it.

Some strategies that may help living with chronic pelvic pain are increasing components of self-compassion, managing worrying and distressing thoughts through mindfulness and shifting our focus of attention. Learning about behavioural strategies and physical movement is also helpful to reduce the fear of pain and getting into the habit of avoidance.

FURTHER INFORMATION FROM ENZ:

Leanne Wait has some great advice about pelvic physiotherapy which is another TOOL for managing pelvic pain and compliments Hannah's recommendations. At Insideout Physiotherapy in Hawkes Bay, she works with women who have endometriosis, adenomyosis, persistent pelvic pain and pre and post-surgical pelvic pain

<http://www.nzendo.org.nz/media/65357/ask-esig-pelvic-physiotherapy.pdf>

MORE ABOUT THE AUTHORS:

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