

Pelvic and Vulvodynia pain - case study.

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Vulvodynia and pelvic pain

The patient came to the CiONE Postural Rejuvenation Clinic 12 months ago, with many years of extreme chronic pain with in her Urethra, Vulva and Vagina wall. She had suffered with Vulvodynia since her early twenties.

It took her many years to actually get a diagnosis – through the normal pathways and in her own words...

“...after many failed visits to see GP’s, gynaecologists & urologists. I knew very little about the condition & was repeatedly told there was no cure. I had a burning / stabbing / broken glass type pain in my vagina & urethra. My bladder was heavy & extremely irritated by most foods & drink.

I then developed terrible muscular pain in my back & in my thighs. It was a constant pain & this greatly impacted my quality of life.

Completing the simplest of daily tasks was becoming impossible due to the intensity of my pain. It hurt to walk, sit down and to drive. I even struggled to know what to eat & drink because everything irritated my bladder apart from water.

My condition just seemed to get worse & worse & it not only affected me physically but also mentally. I became very reserved. I cut myself off from friends & family & drank alcohol heavily to try to block out some of the pain.

I rarely went out of the house unless I had to. Some days the pain was so severe I couldn’t even wear underwear. I hated the way I looked, felt & was thoroughly miserable & I didn’t see a way out of the situation.

No one seemed to understand Vulvodynia & I suffered in silence for a long time.”

The patient was not really aware of what had caused the condition to start, although she had been in a couple of relationships that had gone the wrong and had had many ‘falls’ and ‘trips’ during her lifetime, which potentially could had nudged her pelvis ‘out of line’...

The condition was clearly effecting her Vulva and irritating the Pudendal nerve. She ultimately, after many years of ‘miss diagnosis’ came across Maria Elliot, who then in turn after her own assessment, referred her on to the CiONE clinic, where both Maria Elliot and Tim King work together on BiOPelvic Neuro Dynamics....

Again in the patient' s own words...

"I first heard about CiONE through Maria Elliot. I saw Maria's name on many Vulvodynia forums online. She had great reviews & I arranged to meet her at the Harley Street Clinic.

After assessing me Maria recommended I went to CiONE, as she suspected my pains were muscular / skeletal related & Tim King was a leading specialist in this area.

I booked an appointment at CiONE & can quite honestly say I have never looked back since.

I remember my first appointment meeting Tim and the first thing he did was just listen to me. I went right back to my childhood & discussed everything & anything that could have contributed to my condition.

No stone was left unturned. That really meant a lot to me, because no one had actually listened to me properly before & understood my pains. I very quickly felt at ease & was able to relax enough to discuss some quite frank, difficult & embarrassing issues. I left my appointment feeling very positive & excited at the prospect of getting better. Someone had finally given me a light at the end of the tunnel..."

It was clear - following the patient working closely with Maria Elliot - that the body in regard to the 'internal' pelvic floor treatments given, was not retaining the 'relief' post treatment – even though the treatments were helping immensely with the excessive 'acute' pain – Hence Maria felt the need to look laterally and attempt a different approach towards the diagnose of what was causing the Complex Pelvic Pain.

A recent study in "Electrophysiological Identification of Central Sensitization in Patients", interestingly studies whether 'Central sensitization' occurs under 'trauma' - within the Pelvic arena.

Central Sensitization is defined as; 'an augmentation of responsiveness of central cortical neurons to input from peripheral nociceptive structures'. The results of the study support the presence of Central Sensitization - because of exaggerated transmission of pain sensation to the somatosensory cortex.

Therefore, if we look laterally at these conditions – creating the 'normalization of transmission' ie; taking the pressure off and de-impinging the nerves, through identifying the source rather than the acute ailment. We feel that this is an important step in the treatment of patients with Complex Pelvic Pain.



The patient's life had come to a stop due to the condition, Sex was completely off the menu and sitting down was becoming more and more difficult.

The patient was assessed Biomechanically and had a Custom Pair of Stability Plates made at CiONE. These 'Plates' fit into shoes perfectly and ensure that the feet and knees track in a straight line for every step taken.

This is the KEY to unlock the pelvis and to allow it to realign and de-rotate back to its natural position. The ground reaction force through the corrected foot placement – de rotates the lower limb – (every step) – ensuring that the femur and the femoral head create the necessary de-rotational force to 'unlock' and 'free-up' the dysfunction.

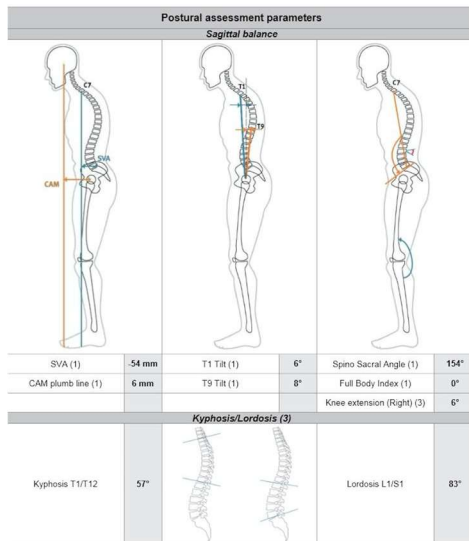
Again in the patient's own words...

"It was explained that I would need to wear customised plates in my shoes every day to realign my pelvis. The way my pelvis was positioned was affecting my overall posture & was the main reason for my pain. Once the pelvis was starting to realign, we could then start to release some of the muscles that were contributing to my pain & tension.

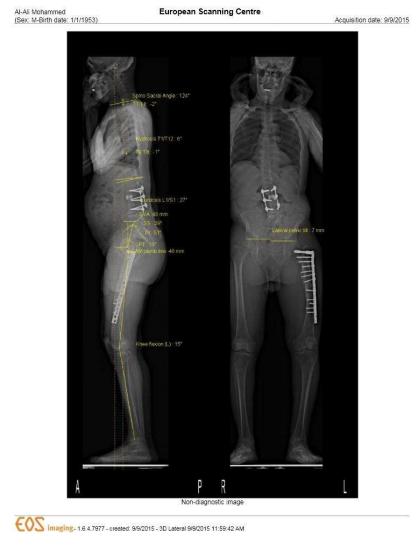
To be honest the plates didn't really bother me. I was really excited about starting the programme & decided I would commit 100% to do everything I needed to do. The plates took me about 2 weeks to get used to & I very quickly noticed a difference in my posture & the way I walked.

They were comfortable & moulded exactly to my foot shape. No more high heels, but that was a very small price to pay!"

On analysis, after the detailed Biomechanical Assessment and noting down the patients Postural Journey from child hood to present day... it became very apparent that the patient, had been walking 'Plantar flexed', with an aggressive 'anterior tilt', 'dynamic torsional twist', and a dynamic 'false' leg length discrepancy, since childhood.



(1) Parameters calculated in the patient frame (based on a vertical plane passing through the center of the scotabula), which corrects the effect of a potential axial rotation of the pelvis during acquisition.
(3) Parameters calculated in the radio frame.



This aggressive anterior tilt of the pelvis, had created medial rotation of the lower limb and thus created a 'Metatarsal Phalangeal joint jam' at the point of 'toe-off' in both feet – which would (long term) evolve into a Hallux Valgus/Bunion. The patient's proprioception (spatial awareness) was managing this element of the dysfunction, by re-calibrating, to cater for both the excessive pronation and the dynamic 'false leg length' within the lower limb.

To compound the mechanical dysfunction's being experienced by the patient, the body-type was clearly 'Hyper-mobile' - which although on one hand was helping to 'mask' the daily pain – on the other hand - the irritation and inflammation was becoming too 'excessive' and 'acute', thus causing high levels of exertion, to simply move and therefore created excessive/chronic fatigue symptoms, while trying to manage the pain.

It therefore was apparent that the combination of ALL these factors, was creating intense and excessive pressure on the bladder, bowel and Urethra, creating impingements of the Pudendal nerve and forcing the 'spiral down' and onset of Complex Pelvic pain and Vulvodynia.

The next phase of the assessment was to do the CiONE 'Bio-Fascial' test - as part of the BiOPelvic neuro dynamics approach, to see whether a past trauma, had created a 'connective tissue' Myofascial spasm.

A Myo-fascial spasm - which involves the 'Vagus' nerve creating an internal spasm of the connective tissues, to protect the body, at the point of imminent impact, by stimulating a 'flight' or 'freeze' reaction to the 'trauma'.

In CiONE we have spent the last 10 years working out how to release these spasms successfully. This is known as a 'Bio-fascial release' and the CiONE methodology has a now 'tried and tested' protocol, involving the ancient Japanese therapy of Amatsu, as part of BiOPelvic Neuro dynamics; practiced within the Harley Street, London and Midland centres.

Initially in this patient's case, the Piroformis and the Glut Medius were in a chronic spasm. These were all released successfully and an immediate benefit was seen, in regard to the tensions in the Patient's global muscles, 'freeing up' the Gait and nerve impingements dramatically.

In addition to these the Gemelus Inferior/Superior was also in deep spasm - effecting the hip flexors, Sartorius , Psoas and Groin. A secondary Bio-fascial release was done and the residual acute pain immediately ceased.



The Biofascial release involves the ancient therapy of Amatsu – which essentially works on similar guidelines to traditional Acupuncture but without the needles...The Amatsu techniques are gentle and ‘non evasive’, relaxing the Glut Maximus within 5 minutes. Once the Glut Maximus is in a relaxed state – the western therapy technique of ‘triggering’ can be used. It is this element that causes the 3 seconds of excruciating pain. However, this 3 seconds of pain, is insignificant when the long term postural and connective tissue spasm pain - disappears.

Again in the patient’s own words...

“The Myofacial/Amatsu release is incredible. Very painful...but the results are amazing.

The first release I had was by far the worst because we were releasing some really nasty muscle spasms’ in my legs. Though extreme I took comfort in the knowledge that it will never be that bad again.

It’s never going to be a nice experience but after the muscles have been released I immediately feel great. The muscle pain completely disappears with the exception of some tenderness & bruising afterwards.

The process of the Myofacial / Amatsu release was explained to me in depth in the first few sessions so I was mentally prepared. I think that was important & helped me deal with the physical pain element.

This procedure has contributed towards my recovery massively - as it definitely took the pain away - but its then up to the body to maintain this release.

It’s very common for the muscles to tighten again after a period of time & so the procedure has to be repeated when this occurs. I have had this several times now and each time I have a release, the period of time it takes for the muscles to tighten again is longer & longer...”

Once the Bio-fascial release is done and the body settles we can then start to guide the patient on how to walk, to prevent the damaging ‘negative weight load’ occurring in their ‘day to day’ postural dysfunction.

To ensure that the patients pelvis realigns and stabilises, Tim King created an exercise/rehab program created from his 3 passions of Pilates, Yoga and Tai Chi Chuan. The BiOCORE program is developed as 15 exercises and is utilises regularly within Elite sport. However, in the area of correcting the excessive anterior tilt of the pelvis, only 3 exercises are required.

The BiOCORE Program is the essential ingredient for maintaining the stability of the Pelvis and needs to be taken on board daily as a 'Health' exercise and not as a 'fitness' exercise.



Again in the patient's own words...

"Part of the BiOCORE programme was to complete daily exercises at home.

These were basic & I only needed to do this for a few minutes a day or as much as my body could cope with.

I found this hard in the beginning because the pain would sometimes feel worse after stretching in my legs & I had to include this in as part of my daily routine.

I tried really hard (sometimes too hard) to complete as many exercises / stretches as possible. It took a long while for my body to adapt to this because my muscles were so tight & painful. But it got easier as time went on & I'm now continually adding new stretches & techniques to my daily routine..."

The combination of stabilising the pelvis and thus the skeletal structure – results in the 'cause' of the original dysfunction to be eradicated. If the original cause is no longer apparent and the body can start to function efficiently, without any 'negative weight-load' during stance and Gait, the "Electrophysiological" aspect of the Central Sensitization of the body becomes under control and the patient can make a FULL recovery.

The final piece of the jigsaw was to ensure that the patient's Coccyx bone was in place and not protruding or irritating the internal intrinsic muscle groups or indeed the Pudendal Nerve

The Coccyx in our opinion, plays a major part in keeping the dynamics of the skeletal structure balanced, when moving dynamically. The Amatsu manipulation of the Coccyx bone is a 'gentle' manipulative technique that is led by the patients 'breath' at all times.

The coccyx if dysfunctioning even minutely, can impinge the Gemellus Inferior and irritate the Pudendal nerve. Indeed, we have found that releasing the Gemellus Inferior and Superior – while putting a small amount of 'internal' pressure on the tip of the coccyx - is enough for the tail bone to realign quickly and effortlessly – without any trauma or discomfort.



Again in the patient's own words...

"...the Coccyx release was the final part of the jigsaw. In my opinion the last 25-30% of the discomfort/Pain that I was feeling seemed to disappear once the Coccyx bone was re-aligned...it truly was that miraculous.

Yes, I did feel a little sore for 2-3 days after the release due to the physical fact that my tail bone had moved back to its correct position - but the procedure was quick (lasted about 3 minutes), easy and painless, and Tim at all times ensured that I was comfortable and aware of exactly what was happening. "

To conclude the Patient is now in our opinion back to an 80% plus state of stability and is continuing to improve daily. Her Pelvic pain and Vulvodynia is now under control and she can wear normal underwear and jeans again, enjoying exercising and normal social activities – ie connecting with her family and friends. Her chronic 'Pelvic Pain' has now gone and her remaining daily pain is now a discomfort and reducing in intensity daily.

Finally in the patient's own words...

"...CiONE has changed my life dramatically this year..."

- **I can now eat & drink whatever I want without irritating my bladder.**
- **I don't take any pain relief medication**
- **I can walk /climb stairs comfortably**
- **I can exercise again - such as swimming / jogging.** *(This was a massive achievement for me as it helped me feel stronger & improved my overall wellbeing).*
- **I can drive and sit for much longer periods of time**
- **I have rebuilt relationships & become much more sociable**
- **My work life is no longer suffering & I even managed to start my own business this year**
- **I have a much more positive outlook on life now & feel like I have my identity back**

There have been lots of ups and downs throughout my recovery process - A lot of hard work, dedication & tears - But my overall experience of CiONE has been brilliant.

The methodology behind this programme is truly amazing & I consider myself extremely lucky to have found such a professional & dedicated practitioner Tim King that fully understands & knows how to treat chronic pelvic pain.

The Harley Street Clinic has always treated me with great respect & dignity. Supported me both mentally and physically. As a percentage so far (12 months) I would say CiONE has eliminated 70% of my day to day pain & I will continue my journey with CiONE until full recovery.

I would strongly recommend CiONE to any person male or female experiencing pelvic pain or any other kind of skeletal, muscular related pain..."