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Hot Off the Presses: New Drug for Vulvodynia

About 8 percent of women in the US suffer with vulvodynia. This is a chronic pain condition that effects a woman's external genitals, called the vulva. The cause of vulvodynia is unknown and there is no cure. For some the pain occurs in one part of the vulva. Other women have pain in multiple areas. Women with vulvodynia may have an increased number of pain-sensing nerve fibers. These irritated nerves connect the vulva to the spinal cord, which can result in widespread pelvic pain.

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With this understanding, researchers set out to create a new drug for vulvodynia. They learned that combining two drugs (baclofen 5% and palmitoylethanolamide 1%) was better for relieving vulva inflammation. Plus, a topical medicine spread on the vulva area, was found to sooth both the inflamed vulva tissue and the nearby nerve endings and cells. This resulted in better pain control.

So, can you get this new drug NOW? Since it is composed of two medicines that are already on the market, a specialized pharmacy can make it for you. Talk with your doctor about this option:

- Find out about potential side effects
- Learn more about having a "compound pharmacy" mix some of this medicine for you.

Are Those Extra Pounds Irritating Your Bladder?

Three different studies remind us that the weight we keep trying to lose may be bothering our bladders. A review of 246 published studies found that weight loss improves urinary incontinence (UI), or accidental leakage of urine. Indeed, doctors in Caen, France, reported that weight loss surgery helps manage UI symptoms. They surveyed 140 patients who had bariatric surgery. Before the operation, more than half of the group reported experiencing UI. One year after surgery, only one in five struggled with UI. Urgency urinary incontinence, or leakage with the sudden, strong desire to pass urine, improved by 37 percent. Stress urinary incontinence (SUI), or leakage associated with activity, improved by 40 percent. The surgery improved not just UI, but also the quality of life for this group.

The third study looked at cure rates for midurethral sling surgery done to correct SUI. Overweight women had lower cure rates than normal weight women. Five years after the surgery, about two out of three of the overweight women were cured of urinary leakage. In contrast, nearly all (90 percent) of the normal weight women were symptom free. Need help losing weight? Find a registered dietitian nutritionist (RDN) in your local area.

PFD Stories Featured in the Mainstream Media

- 5 Bathroom Mistakes that Can Lead to PFDs
- Triathletes Get PFDs, Too
- PFDs Featured on Bangor, Maine's Women's Health Program

Complementary Medicine for PFDs?

"Many Americans—more than 30 percent of adults and about 12 percent of children—use health care approaches developed outside of mainstream Western, or conventional, medicine," reports the National Center for Complementary and Integrative Health, part of the National Institutes of Health. And, women with PFDs use complementary and alternative medicine (CAM), as it is called, at a much higher. The chart provides a list of the top ten CAM therapies used by women with PFDs.

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Research also supports the use of complementary therapies to help manage PFD symptoms. For example, a small study conducted in Brazil found acupuncture helpful for accidental bowel leakage (ABL). For a 10-week period, 16 women with ABL had weekly acupuncture treatments. At the end of the study, all patients reported symptom improvement.

So, is acupuncture for you? This traditional Chinese therapy stems from the belief that the healthy human body is in a state of balanced energy. Energy imbalance can thus cause of health problems, such as PFDs. Acupuncture is one of many techniques used to rebalance the body's energy. Before heading out to get poked and prodded, ask with your urogyn about this and other complementary therapies.

The Rest of the Story

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