

Pudendal nerve “Blocks”

For many decades, nerve blocks have been used to relieve pain from irritated or damaged nerves. Pudendal nerve blocks are a common form of obstetrical anesthesia. Pudendal nerve blocks are used to permit bladder and bowel function in some spinal cord injury patients.

The use of pudendal nerve blocks for treating pudendal neuralgia was popularized by Dr. Maurice Bensignor in Nantes, France. He used a series of three injections around the pudendal nerve. Local anesthesia reduces or eliminates pain for a few hours or days. Corticosteroid medications also assist in reducing inflammation in and around the nerves. Nerve blocks are common treatment in the carpal tunnel syndrome at the wrist. The pudendal nerve suffers the same types of injury and can respond in a similar fashion. Several publications discuss the value of pudendal nerve blocks. Nerve blocks can be diagnostic or therapeutic. These blocks are listed at the end of this discussion.

Diagnostic Blocks

A pudendal block is considered to be ‘diagnostic’ when relief of symptoms is present at office follow-up two hours after the injections, or, for a few days.

Therapeutic Blocks

The same pudendal block that is ‘diagnostic’ is considered to be ‘therapeutic’ if the relief is prolonged for days, weeks or months. Permanent relief is frequent. Two questions are often asked about pudendal nerve blocks.

- 1.) Are pudendal nerve blocks effective in treating pudendal neuralgia?**
- 2.) Can pudendal nerve blocks be repeated in the future?**

The answer is YES!

- 1.) The late Dr. Bensignor performed thousands of pudendal nerve blocks. He noticed improvement in about 70% of his patients at 6 months after the 3rd block. Dr. Amarenco, of Paris, reported 15% of people receiving injections remained symptom free after one year.
- 2.) Repeating pudendal nerve blocks.
Several patients from the Mayo Clinic return for treatment at the Center for Urologic and Pelvic Pain because they are experiencing blockage. Each had one to three years of normal lifestyle before pains returned. Repeat treatment is helpful. The man whose scores are illustrated below is now 30 months past his third injection in the repeated series. He is pain free and has normal bladder function.

Our experience with pudendal nerve blocks extends to 1999 at the Mayo Clinic. We used over 2300 ‘pudendal nerve perineural injections’ (PNPI) to treat almost 1,000 patients. Some of those early patients remain NORMAL to this day...a permanent cure. They must refrain from aggravating activities until they are pain free. Other patients have returned to full activity, although we do not recommend that. We are developing a data base to show the effectiveness of pudendal nerve blocks. Some responses are indicated below.

- Three months after his 3rd block, a 65 year old man from Florida stated... “The change in my life has be nothing short of miraculous.” November 2006
- One year after his 3rd block, or PNPI, ‘Ben’ wrote: *“I have been feeling really good these last five to six months. In the last three months, I have been running and have worked my way back to 12 miles/2hour runs. I completed a duathlon using a hornless saddle. Overall, I feel I am 95 to 98% back to normal.”* We are waiting for his 24 month scores and ‘report’ in the early Spring of 2006.
- Three years after his 3rd block, a young attorney from Wisconsin remains symptom free. He had 33 months of terrible bladder problems caused by sitting for 14 hours on air flights across the Pacific Ocean. All other ‘conventional’ urological treatments failed.
- Six years after his 3rd block a man from North Dakota remains free of pain and his bladder function is normal. He had severe pain for 10 years and had used a catheter to drain is bladder for 3 years. Sexual function returned to normal. Many treatments, surgeries and visits to a major clinic had not given any relief until was diagnosed with pudendal neuralgia and treated appropriately.
- In 2004, two men, one from Iowa and one from Pennsylvania, were ‘cured’ by one PNPI.
- In 2005, one man was ‘cured’ after 2 injections. These men are dismissed from our practice but we monitor their pain scores for future medical publications to inform doctors of pudendal neuralgia and its treatment
- An 81 year old lady from Wisconsin is ‘cured’ 2 ½ years after her 3rd pudendal block. She had come to the Center for Urologic and Pelvic Pain after 4 years of misery including bad pain and terrible bladder problems. A hysterectomy and placement of an electronic nerve root stimulator had not helped her. Pain medicines were not effective. She is living a normal life. Her symptom scores were normal in October 2006.

Why do blocks fail?

A major reason that blocks fail is patient activity. When you feel better you return to the ‘old’ activities that repeat the damage to the nerve. Self-care is a continuing, perhaps life-long, treatment process. Blocks can fail if the medicines are not placed near the nerve. Complete accuracy is not possible with any injection techniques available.

When a series of blocks is diagnostic or has a limited duration of effective pain and symptom control, we recommend surgical decompression of the pudendal nerve. In many patients the reason for lack of effective response to pudendal blocks is apparent. The nerve is simply too damaged by compression to permit any healing after the injections. The nerve may be compressed higher than the usual locations for injection. Occasionally

we see nerves with damage that will be permanent and will not respond to any treatments.
Research to help this group is necessary.