

Transvaginal Mesh Injured Women Seeking Disability

Over 100,000 women who have suffered from complications of the transvaginal mesh device have filed personal injury claims against the device manufacturers.

SANTA BARBARA, CA, UNITED STATES, December 18, 2018 /EINPresswire.com/ -- Over 100,000 women who have suffered from complications of the transvaginal mesh device used for pelvic organ prolapse (POP) and stress urinary incontinence (SUI) have filed personal injury claims against the manufacturers of their device and these cases have been consolidated in West Virginia in the largest Multidistrict Litigation (MDL) in history. Despite the MDL being closed to new case there will be large numbers of women filing lawsuits in State Courts across the country for catastrophic injuries caused by transobturator slings that continue to be implanted by the thousands across the country. Injuries from the transobturator sling pudendal neuralgia, obturator neuralgia, and Complex Regional Pain Syndrome (CRPS) produce life-time disability and requires ongoing medical treatment.



What is clear from the 'Transvaginal Mesh Debacle' is that thousands of women have claimed disability for their injuries, many of which have been denied. It is essential for women to understand the requirements for disability which include the following: 1) The condition must be

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Dr. Greg Vigna

severe in that they impair a person's ability to provide for their normal activities of daily living, 2) The condition must last at least 12 months, and 3) Functional impairment is such that there is no 'other work' that the claimant can perform.

Social Security must not ignore reported pain in any disability determination. Pain, however, must be supported by 'substantial evidence' that it somehow 'limits functional capacity physically and/or mentally'. As many women who have failed in their application for disability, pain is just pain, if it is not accompanied by a diagnosis. Social Security must consider certain documented

diagnoses in the medical record including 'neuralgia' and 'complex regional pain syndrome'. The definitions of 'neuralgia' supports a claim for disability in that it is 'chronic pain' when an 'individual feels sensation of pain without any actual stimulation of pain receptors'. The diagnoses of CRPS Type 1 and Type 2 in the medical record should support a claim for disability in that these are well described entities that produce catastrophic disabling pain that is often progressive.

TVM injured women with documented obturator neuralgia and/or pudendal neuralgia should support an application for disability benefits. Ongoing medically necessary treatments may

include opioids, anticonvulsants such as Neurontin or Lyrica, antidepressants such as Elavil or Cymbalta, and implantable devices such as nerve stimulators will support these diagnoses and a claim for disability.

TVM injured women with documented CRPS Type 1 (Reflex Sympathetic Dystrophy) which results from injury to soft tissues or CRPS Type 2 (Causalgia) which results from injury to the obturator or pudendal nerve, or CRPS (unspecified) should support a claim for disability.

Greg Vigna, MD, JD, a practicing physician and national pharmaceutical injury attorney, states that he has 'discussed disability issues with a large number' of women inside the restraints of the MDL and now those who have suffered catastrophic injuries from the transobturator sling device used for stress urinary incontinence and that he has 'never' had a woman lose an appeal for earned disability benefits if they have documented pudendal neuralgia, obturator neuralgia, or CRPS diagnosis' in their medical records. Unfortunately, Dr. Vigna adds that 'many women with symptoms consistent with these diagnoses and disability from these symptoms have not been diagnosed and have failed to obtain the disability benefits they require'.

For more information, and to contact Dr. Greg Vigna, visit: http://pudendalportal.lifecare123.com/ or http://hibner.phaktory.net/video/65674772.

Data Source: SSDRC.com

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