

Interstitial Cystitis and Mid-urethral Slings: Please, ladies, don't let them remove your bladder

One side effect of pudendal neuralgia is bladder pain, but many medical professionals incorrectly diagnose this symptom for interstitial cystitis.

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Ethicon, Boston Scientific, and Coloplast have not warned physicians that patients with a diagnosis of IC represent a high-risk population and that mid-urethral polypropylene slings should be avoided.”

Dr. Greg Vigna

“Unfortunately, women continue to suffer for years with an incorrect diagnosis of interstitial cystitis (IC) and have undergone years of unnecessary and sometimes harmful treatments only to be diagnosed with pudendal neuralgia. Complete mesh removal has provided meaningful improvement in pain and function”...Greg Vigna, MD, JD.

Dr. Greg Vigna, practicing physician, national pharmaceutical injury attorney, and Certified Life Care Planner, comments, “Unfortunately women continue to be managed by urogynecologist, urologist, and gynecologist who still have not been warned that transobturator slings

(TOT) cause pudendal neuralgia and retropubic slings and pudendal neuralgia produces bladder pain. This is the same symptom that leads to the incorrect diagnosis of interstitial cystitis. I represent women who have had years of suffering from mid-urethral slings and underwent futile treatment for interstitial cystitis resulting in lost vision from Elmiron, underwent InterStim implantation, and in one case had her bladder removed, only to have a meaningful improvement in pain after complete mesh removal. In each case, there were symptoms of pudendal neuralgia as described by the Nantes Criteria.”

The AUGS 2020 Joint Position Statement on the Management of Mesh-Related Complications for the FPMRS Specialist published by AUGS and the International Urogynecological Association has finally recognized the neurological pain caused by mid-urethral slings and the mechanism of injury:

‘Some patients report pain that may be attributable to nerve impingement from mesh arms that are outside the pelvis (in the groin or in the ischiorectal fossa). In these cases, complaints should

map to dermatomal distributions, and appropriate neurologic and radiologic evaluations should be carried out. Anecdotal evidence has described extensive extravaginal mesh excision, with or without nerve release procedures; there are some data suggesting that this may be more successful in cases of obturator neuralgia than of pudendal neuralgia'

Dr. Vigna adds, "There still hasn't been a warning by mesh manufacturers that transobturator slings produce an 8-fold increased risk of pelvic floor hypertonicity and myofascial pain, and patients with a pre-existing diagnosis of interstitial cystitis are a high-risk population that may increase a woman's bladder pain, and polypropylene slings may cause de novo pudendal neuralgia that has symptoms of bladder pain with filling."

Dr. Vigna concludes, "We have a line of combination medical malpractice and product liability cases across the country forming that goes to the question of medical negligence by physicians that have implanted transobturator slings in women with a pre-existing diagnosis of IC who then develop increased bladder pain with new-onset symptoms of pudendal and obturator neuralgia. Ethicon, Boston Scientific, and Coloplast to this day have not warned physicians that patients with a diagnosis of IC represent a high-risk population that mid-urethral polypropylene slings should be avoided."



Dr. Greg Vigna

The Vigna Law Group targets pudendal and obturator neuralgia caused by the below transobturator (TOT) slings and mini-slings:

Ethicon: TVT-O, Abbrevio

Boston Scientific: Obtryx, Solyx

Coloplast: Aris, Altis

The Vigna Law Group targets the below retropubic slings that cause ilioinguinal neuralgia, pudendal neuralgia, and Complex Regional Pain Syndrome Type 1 and 2:

Ethicon: TVT, TVT-Exact

Boston Scientific: Advantage Fit, Lynx

Coloplast: Supris

To learn more on the anatomical basis for TOT injury or irritation to the obturator and pudendal nerve and the treatments of obturator and pudendal neuralgia visit:

<https://vignallawgroup.com/ebooks/pelvic-mesh-pain/#page=59>

Download a [FREE BOOK](#) on Vaginal Mesh Pain.

Visit our website to listen to a [Podcast](#) from the Vigna Law Group.

For articles, video resources, and information, visit the [Pudendal Neuralgia Educational Portal](#) or <https://tvm.lifecare123.com/>.

For information regarding sling related complications visit:

<https://tvm.lifecare123.com/slingebook.html>

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https://www.augs.org/assets/1/6/Joint_Position_Statement_on_the_Management_of.99428.pdf

Pelvic floor hypertonicity in women with pelvic floor disorders: A case control and risk prediction study. Cameron, Sabourin, Sanaee, Koenig, Lee, Geoffrion. Neurourology and Urodynamics. 2019, 38: 606-702.

<https://onlinelibrary.wiley.com/doi/abs/10.1002/nau.23896>

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