

Vaginal Mesh Update: Neurosurgeons, PM&R, and Pain Physicians step in

SANTA BARBARA, CALIFORNIA, UNITED STATES, November 22, 2021 /EINPresswire.com/ -- "We are seeing women obtaining care from multiple physician specialist outside of the field of urogynecology who are treating pudendal, obturator, and ilioinguinal neuralgia caused by retropubic and transobturator slings"...Greg Vigna, MD, JD

Dr. Vigna adds, "The neurological pain syndromes caused by transobturator slings and retropubic slings may take a few years for a client to become medical stable after becoming diagnosed with mesh related pudendal, obturator, and ilioinguinal neuralgia. Only a few physicians in the United States have acquired the skills to provide both partial and complete mesh removal for women with pain related complications caused by the mesh. Once past this ever-growing log jam care for pudendal, obturator, and ilioinguinal neuralgia has improved over the past 5-6 years mainly because specialties of Physical Medicine and Rehabilitation, Interventional Pain Management, and



Dr. Greg Vigna

Peripheral Nerve Neurosurgeons have stepped into managing pelvic neuropathic pain."

Dr. Vigna continues, "Physicians across the country are providing treatments that include nerve blocks, neuromodulation with nerve stimulators or radiofrequency ablation, surgical

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Women are overcoming the barriers to obtain the care they choose and that wasn't the case five years ago." *Greg Vigna, MD, JD* decompression of nerves by way of neurolysis, Botox for associated pelvic floor spasm, and Ketamine for CRPS."

Dr. Vigna concludes, "The care that a woman chooses for her mesh related complications have many barriers, the biggest being the American Urogynecology Society, which has done a poor job at meeting the needs of the injured." The American Urogynecology Society finally in 2020 recognized the neurological basis for pain caused by the arms of transobturator and retropubic slings. They call the life-altering pain 'extrapelvic pain' and cite two articles from 2010 and 2012 as their basis for this opinion (Citation 30, 35).

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

Symptoms of neurological injury as described by AUGS 2020 Position Statement from slings and vaginal mesh devices include the following:

- 1) Groin pain
- 2) Hip pain
- 3) Inability to wear tight paints
- 4) Clitoral pain or numbness
- 5) Severe pain that makes vaginal penetration impossible
- 6) Tailbone pain
- 7) Anorectal pain
- 8) Painful bladder
- 9) Pain with sitting

Ben Martin and Laura Baughman are national pharmaceutical injury attorneys in Dallas, Texas. Dr. Vigna is a California and Washington DC lawyer who focuses on catastrophic injuries and the neurological injuries caused by transvaginal mesh devices including pudendal neuralgia, obturator neuralgia, and complex regional pain syndrome.

<u>To learn more on the anatomical basis for TOT complications</u> including obturator and pudendal neuralgia and the treatments of obturator and pudendal neuralgia click here: <u>https://vignalawgroup.com/ebooks/pelvic-mesh-pain/#page=59</u>

Click here for a <u>FREE BOOK on Vaginal Mesh</u> Pain: <u>https://vignalawgroup.com/publications/</u> For articles, video resources, and information visit the <u>Pudendal Neuralgia Educational Portal</u> (<u>https://pudendalportal.lifecare123.com/</u>) or <u>https://tvm.lifecare123.com/</u>. Click here for information regarding sling related complications: <u>https://tvm.lifecare123.com/slingebook.html</u>

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