



Effective Health Care

Comparative Safety and Effectiveness of Treatments for Pudendal Neuralgia Nomination Summary Document

Results of Topic Selection Process & Next Steps

- The topic area, *Comparative Safety and Effectiveness of Treatments for Pudendal Neuralgia*, is important, but not feasible for a systematic review at this time. Other topics have higher priority for limited program resources. No further activity on this topic will be undertaken by the Effective Health Care (EHC) Program.

Topic Description

Nominator(s): Individual

Nomination Summary: This topic was nominated by a patient with pudendal neuralgia. The nominator expressed frustration that the AHRQ Evidence-based Practice Center Program report on non-cyclic chronic pelvic pain was restricted to women and did not include the treatment of pudendal neuralgia within the scope of the review. The nominator also asserts that there is limited guidance available surrounding the treatment of pudendal neuralgia, and as a result, that many physicians are uncomfortable with or ill-equipped to treat patients with pudendal neuralgia

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Population(s): Individuals with pudendal neuralgia

Intervention(s): Pharmacologic (e.g., analgesics, pain modulators, steroid injections), lifestyle modifications, physical therapy, surgical (e.g., nerve decompression), nerve stimulation

Comparator(s): Those listed above (i.e., compared to each other), observation

Outcome(s): Disability (functional outcomes), level of pain, quality of life, occurrence of adverse events

Key Questions from Nominator: What is the comparative safety and effectiveness of treatment options for pudendal neuralgia?

Considerations

- Pudendal neuralgia is associated with chronic pain in the pelvic region, often caused by entrapment of the pudendal nerve. The International Pudendal Neuropathy Association estimates that the incidence of pudendal neuralgia is 1 per 100,000; however, clinicians treating the condition report that the incidence may be significantly higher. The condition is frequently classified as a subset of chronic pelvic pain, which refers to several pelvic pain conditions including endometriosis, intra-abdominal

adhesions, myofascial pain disorders, irritable bowel syndrome, and interstitial cystitis /painful bowel syndrome, among others.

- There are a wide range of treatment options available to treat chronic pelvic pain and other neuropathies. Common categories of treatment options include pharmaceuticals, lifestyle modification, surgical interventions, and nerve stimulation. Patients may also receive treatment to address the symptoms associated with pudendal neuralgia rather than treatment to address the principal cause of pain.
- Based on a scan of the literature, there does not appear to be a recent systematic review or evidence-based clinical guideline that evaluates the effectiveness of a range of treatment options for pudendal neuralgia. The scope of an existing AHRQ report on chronic pelvic pain did not include pudendal neuralgia.
- The scan identified 31 relevant studies; however, these studies varied widely in terms of the types of interventions they addressed. No ongoing trials on the treatment of pudendal neuralgia were identified.
- Although a scan of the literature indicated identified studies on this topic, the evidence is too diffuse (e.g., includes a wide range of interventions) at this time, limiting the feasibility of a systematic review.