

Dyspareunia against the background of pelvic muscles myofascial pain syndrome. A case report.

Author: Bazieva Taisa - Obstetrician-Gynecologist

Place of work: JSC "Medsi" (Moscow, Russia).

- A 35-year old patient referred with the pain during sexual intercourse (9 out of 10 on VAS scale) that she had been experiencing for 9 years. As a result, she had completely refused to have sexual life for 7 years. She had been married for 15 years.
- Based on existing symptoms, the diagnosis was revealed: Chronic pelvic pain. Pelvic muscles myofascial pain syndrome. Dyspareunia.

Gynecological examination at her first appointment with me was limited to be fully performed as she had acute pain syndrome (8 out of 10 on VAS scale, and 5/3 on HADS scale) when inserting a finger. Cotton swab test was negative. Against the background of correct relaxation and abdominal breathing, it became possible to insert a finger into the vagina and assess the pelvic muscles: the coccygeal, ischiococcygeus muscles, pubococcygeus muscles/puborectalis muscles on both sides are examined, the internal obturator muscles on both sides were painful (7 out of 10 on VAS scale), compacted, palpation determined an increased pathological spasm.

Recommendations:

- Vaginal massage.
- Pelvic floor muscle relaxation exercises.
- Selective serotonin reuptake inhibitors (60 mg of Duloxetine daily for 3 months).
- Psychotherapist.

After 4 weeks of following these recommendations:

- a decrease in pain during sexual intercourse with her partner to 3 out 10 on VAS scale.
- the possibility of have regular sexual life.

Seven weeks later, the patient admitted the total absence of pain during her sexual intercourse.