

- International Association for the Study of Pain (IASP) defines pain as an unpleasant sensory and emotional experience associated with actual or potential tissue damage.
- Chronic pelvic pain in men is termed prostatodynia. It may include symptoms originating from the prostate, bladder, groin or perineum. Pain persists for at least 2 weeks of every month for a period of at least 6 months.
- Primary pelvic pain may be associated with one or more of the numerous structures present in the pelvis.
- Pelvic pain can have many contributing factors making it difficult to treat effectively.
- Approximately 2 million men in the U.S. are affected.



Patients suffering with **chronic pelvic pain** are commonly diagnosed with a specific disorder such as chronic prostatitis, interstitial cystitis, or irritable bowel disease. For many patients, CPP is associated with more than one diagnosis, such as interstitial cystitis and chronic prostatitis. The close proximity of pelvic nerves allow one organ to effect another, referred to as neural cross sensitization. Despite a specific diagnosis, treatment to relieve the pain is limited and the disease becomes the PAIN!!!

**Dr. Spiel offers treatment to eliminate the pain.**

Call **732-548-2000** to schedule an evaluation to discuss options to eliminate your pain.

**Stop the pain and enjoy life!**

*Stop pelvic pain... enjoy life!*

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Dr. Spiel has specialized in the treatment of pain for approximately 15 years. He is known to pursue the newest technologies available, in order to expand treatment options for patients who are not successfully treated elsewhere. His aggressive

interest in evolving treatment and technology, along with his unique background, including certifications in interventional pain and radiology, results in effective treatment for those who suffer with pain.

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# Male Chronic Pelvic Pain



**Do you experience...**

- pelvic pain?**
- pain with sexual activity?**
- pain when urinating?**
- pain with bowel movements?**
- pelvic pain with physical activity?**

**Stop The Pain!**



# Disorders Associated With Chronic Pelvic Pain(CPP) / Chronic Prostatodynia

- Urinary Tract Infection
- Urinary Obstruction
- Interstitial Cystitis
- Irritable Bowel Disease
- Inflammatory Bowel Disease
- Constipation
- Prior Pelvic Surgery
- Chronic Back Pain
- Fibromyalgia
- Bladder Cancer
- Radiation Cystitis
- Colon Cancer
- Abdominal Wall Myofascial Pain
- Chronic Coccygeal Pain
- Faulty Posture
- Iliohypogastric, Ilioinguinal, Pudendal or Genitofemoral Neuralgia
- Pelvic Floor Tension Myalgia
- Abdominal Cutaneous nerve entrapment
- Somatization Disorder
- Epididymis
- Vasectomy
- Genitourinary Malignancy

## Treatment

Understanding that the nervous system is directly involved in chronic pelvic pain, expands the options available for effective treatment to eliminate pain.

The nervous system is responsible for the transmission of impulses. The transmission of pain signals results in an individual feeling pain. When there is an “up regulation” of the nervous system, there is an amplification of the pain sensation. This “up regulation” prevents the pain from subsiding, and results in chronic pain.

A nerve block targeting the specific associated nerves, interrupts the signal pathway, and **stops the pain**. After successful positive blocks, a temporary



catheter called Intellicath™ may be recommended. Intellicath™ is a temporary catheter used for specific, extended placement, which allows for long term, and sometimes permanent, relief.



Nerve blocks are minimally invasive procedures performed quickly and safely in an outpatient surgery center.

An anesthesiologist administers mild sedation for patient comfort, and x-ray or ultrasound is utilized to ensure proper placement. Patients return home the same day often reporting immediate benefit.

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## Understanding Chronic Pelvic Pain (CPP)

Chronic pelvic pain is commonly associated with interstitial cystitis, chronic prostatitis, and irritable bowel syndrome. It often follows an insult such as injury, surgery, or disease, but persists long after the initial insult is managed or resolves. The pain which is left can be debilitating and patients are left with no answer to explain the cause. Patients can experience increased pain with sexual activity, bowel movements, urination or physical activity. Extensive work up including cystoscopy and ultrasound may offer a diagnosis, but no solution for pain control. Effective treatment is unlikely with traditional therapies, because the pain is commonly associated with an “up regulation”, or elevated sensitivity, of the nervous system.

In a healthy state, the nervous system can fluctuate between “up regulation” and “down regulation” as needed. The dynamic nature of the nervous system allows for automatic fluctuations as the demands of the body changes. When the system malfunctions, certain pain may be abnormally “up regulated” and harmful to your overall well-being. This response of the nervous system can be modified utilizing nerve blocks to return your body to its natural state and **eliminate the pain**.



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