

Get the most from your SoLá Therapy

PELVIC PAIN TRIGGERS

IDENTIFY & AVOID PAIN TRIGGERS

The benefits of SoLá Therapy can be maximized by identifying and avoiding pain triggers.

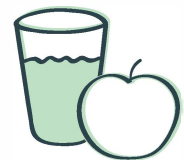
Common triggers for people with CPP can include:

- ✗ **Stress:** At work and/or in your day-to-day life.
- ✗ **Lack of sleep:** Plays a major role in how you feel the next day.
- ✗ **Excessive physical activity or exercise:** Too much, too soon can trigger pelvic muscle pain.
- ✗ **Significant inactivity:** Sitting (or standing) for long periods can also trigger pelvic muscle pain.



FOOD & FLUIDS ARE FACTORS

What you eat and how much fluid you drink are important factors in triggering pain flares. Drinking too much fluid (over 64 ounces per day) or not drinking enough (under 24 ounces per day) can trigger both bladder symptoms and pelvic floor muscle symptoms. If you also suffer from irritable bowel problems, foods that are high in acid (such as red tomato sauces, spicy foods, or citrus fruits and drinks) can be triggers.



If you search the Internet, you will find guidance for anti-inflammatory diets to reduce inflammation throughout the body. Many of these diets are beneficial for those who suffer from chronic pain. The paleo diet is one example.

Remember!

Minimize stress, get plenty of sleep, and consider an anti-inflammatory diet.

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STAY REGULAR

Keeping your stools soft to prevent pelvic muscle straining is important. Supplements should be your first approach (called first-line therapy) to help produce regular soft stools (i.e., not too hard and not too loose).

If constipation is a problem: Taking a stool softener (such as over-the-counter brands MiraLAX® or Colace®) should be considered.

If your stools tend to be loose and more like diarrhea: Taking fiber supplements (such as Metamucil® or Benefiber®) are often beneficial.



Remember!

Supplements work best when taken regularly. Don't wait until "things get bad."

OTHER SUPPLEMENTS

For urinary urge or diarrhea: Prelief™ is an over-the-counter supplement that takes harsh acid out of urine (and feces) to help people who:

- Urinate too often (called urinary frequency)
- Or have sudden, compelling urges to urinate (called urinary urgency)
- Or have diarrhea

For menstrual pain: If menstrual flow is especially heavy—or is associated with severe menstrual cramps—talk to your gynecologist about how you can gain control of this monthly trigger. Taking nonsteroidal anti-inflammatory drugs (NSAIDs) 24 hours prior to the onset of your period is often very beneficial for bad cramps and heavy menstrual flow. Birth control pills, or perhaps intrauterine devices (IUDs) that slowly release progesterone, are options that should be discussed with your gynecologist.



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STOP PAIN FROM STARTING

Once you have identified a pain trigger that you know will be repetitive (for example, sexual intercourse), it is always best to initiate an intervention prior to the repetitive trigger, to halt the pain before it starts.

Interventions to prevent pain can include:

- ✓ Relaxation exercises (provided through the SoLá Therapy mobile app)
- ✓ Mindfulness meditation
- ✓ Muscle relaxers (or vaginal suppositories that contain muscle relaxers, such as valium or baclofen)



MEDICATIONS TO AVOID

There are certain medications that can worsen your pain disorder. You should try to avoid them or only use them very cautiously.

Medications that can worsen your pain include:

Stimulants:

Any medicines that would be considered a stimulant (such as Adderall) tend to make muscle pain worse. For some patients, decongestants will have a similar affect.

Cymbalta®:

While often prescribed for various pain disorders, approximately 5% of patients who use Cymbalta suffer from muscle spasms and musculoskeletal pain.¹ Thus pelvic pain symptoms—or voiding dysfunction—are possible drug side effects, especially at higher doses.

Narcotics:

Generally not very effective for muscle pain, narcotics have been shown to improve pain in about 65% of patients with interstitial cystitis.² Narcotics have also been shown to make the nerves that are involved in pain disorders become persistently hypersensitive.³

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RELAX REGULARLY

Hopefully you will have access to a qualified pelvic floor physical therapist who can provide specialized therapy to help alleviate your painful pelvic muscle spasms. These specialists can also teach you pelvic stretching and relaxation methods.

The SoLá Therapy mobile app provides you with video demonstrations of key stretching and relaxation exercises. Compliance with these methods is essential to optimizing your results. You will receive an invitation to download this free app when registering for your first SoLá Therapy treatment. You can also help keep your muscles relaxed with simple home therapies, including using a heating pad, or taking a nice hot bath.



Learning muscle awareness—and keeping your muscles relaxed through a regular program of exercise and relaxation techniques—cannot be overemphasized. Sticking with this type of program can make all the difference in the world.

Remember!

Muscles have memory. Once relaxed, hypertonic, tight, spastic muscles will try to go back to their tight, spastic state. However, continuing trigger avoidance, stretching, and relaxation exercises will prevent a return to a tight and painful state.

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HELPFUL RESOURCES

These books are all excellent resources to learn more about managing CPP:

Pelvic Pain Explained: What You Need to Know. 1st edition. By Stephanie A. Prendergast and Elizabeth H. Akincilar. Lanham, MD: Rowman & Littlefield; 2016.

A Headache in the Pelvis: The Definitive Guide to Understanding and Treating Chronic Pelvic Pain. By Dr Rodney Anderson and David Wise PhD. London, UK: Hay House UK Ltd; 2018.

Heal Pelvic Pain: The Proven Stretching, Strengthening, and Nutrition Program for Relieving Pain, Incontinence, & I.B.S, and Other Symptoms without Surgery. By Amy Stein. 1st edition. New York, NY: McGraw-Hill Education; 2008.

Break Free

Call **844-557-7652**

with any questions about SoLá Therapy.

Learn more at **solatherapy.com**

or email us at **info@solatherapy.com**

References: 1. Cymbalta [package insert]. Indianapolis, IN: Lilly USA, LLC; 2017. 2. Lusty A, Kavalier E, Zakariasen K, Tolls V, Nickel JC. Treatment effectiveness in interstitial cystitis/bladder pain syndrome: Do patient perceptions align with efficacy-based guidelines? *Can Urol Assoc J.* 2018;12(1):E1-E5. 3. Lee M, Silverman S, Hansen H, Patel V, Manchikanti L. A comprehensive review of opioid-induced hyperalgesia. *Pain Physician.* 2011;14(2):145-161.

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