Persistent Pelvic Pain in Women - Burden on Regional Queensland Healthcare Services

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AIM

To assess the prevalence and demographic characteristics of women presenting with persistent pelvic pain (PPP) across healthcare service settings at Cairns Hospital, Queensland

BACKGROUND

15-27% Of Australian Women

AU\$6.5m Annually

Priority Area 3

National Women's Health Strategy 2020-2030

Defined as non-cyclical pelvic pain of >6 months, PPP contributes significantly to the burden of chronic diseases (1). Current literature suggest that the high volume of patient presentations leads to suboptimal delivery of value-orientated healthcare (2).

However, the lack of epidemiological data for regional communities including Cairns impedes quality improvement strategies.

METHODS

Electronic records of female patients >16 years old (July-Sept 2019)

Emergency Departmen (ED) (n=40) Inpatient Ward (n=21)

Outpatient Clinic (n=44)

Pain attributed to acute medical conditions, pregnancy or post-operative sequelae were excluded

RESULTS

Patients presenting to the ED with an acute exacerbation of PPP have more medical co-morbidities and previous diagnostic laparoscopies compared to outpatient clinics

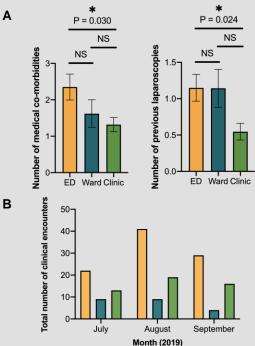


Figure 1. (A) One-way ANOVA with Holm Sidak's multiple comparison tests on medical comorbidities (ED:2.35±0.35; outpatient:1.31±0.19; P=0.030)(mean±SEM) and previous laparoscopies (ED:1.15±0.18; outpatient:0.55±0.11; P=0.024) and (B) trend of clinical encounters. Yellow = emergency department (ED), blue = ward, green = outpatient clinic

Multiple emergency department presentations are associated with younger women and more medical co-morbidities

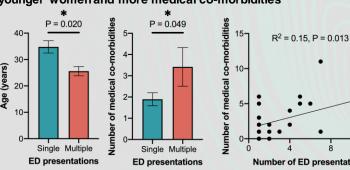


Figure 2. Characteristics of single and multiple emergency department (ED) presentations, including age (single:25.58±1.72 years old; multiple:34.79±2.33; P=0.020)(mean±SEM) and medical co-morbidities (single:1.89±0.31; multiple:3.42±0.91; P=0.049) assessed by independent t-tests and Pearson's correlation.

KEY MESSAGE & FUTURE DIRECTION

- This is the first study assessing the burden of PPP on regional Queensland healthcare services.
- Early multidisciplinary care of patients in a specialist pain service may reduce morbidity and unplanned hospital admissions, improving long-term outcomes for women with PPP.

REFERENCES

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 Joseph, K., & Mills, J. (2019). Unmet treatment needs in patients with chronic pelvic pain in a New Zealand gynaecology service. ANZJOG, 59(6), 856-860.



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