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Groin pain: Structural or neurogenic? Changing treatment and research options

K Dean Reeves University of Kansas, USA

Groin pain presents in several ways, one is typically sports related, also termed athletic pubalgia or misleadingly termed sports hernia. There is seldom any actual herniation, although inguinal canal asymmetries may be present. A variety of abnormalities can be seen on MRI in athletic pubalgia, and regenerative injection or surgical approaches appear to have a high degree of success in treatment. The challenging presentation of groin pain is chronic vulvar/scrotal/rectal/general perineal burning pain in men or women. This complaint is common in the general population, although it is a diagnosis of exclusion after negative OB/GYN or GU evaluation for infections or chronic skin conditions. These patients commonly associate with pelvic floor dysfunction. Allodynia and/or hyperalgesia are common, indicative of neuropathic pain. Neurogenic pain symptoms are only partially remediable with medication approaches.

Biography

K Dean Reeves, MD, is a leading researcher in the field of regenerative injection and is currently focusing on research in chronic pain mechanisms and treatment. He is board certified in Physical Medicine and Rehabilitation and is on adjunct faculty (Clinical Associate Professor) at the University of Kansas. He is on the Board of Directors of the American Association of Orthopaedic Medicine and serves on the Institutional Review Board of the International Cellular Medicine Society.

deanreevesmd@gmail.com

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