



Treatment of Pudendal Nerve Entrapment by Iliococcygeus and Coccygeus Trigger Point Injections with Combined X-Ray and Ultrasound Guidance

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INTRO

- **Pudendal Nerve Entrapment (PNE)** is a rare, overlooked cause of chronic **pelvic, genital, and anorectal pain**.
- PNE occurs most commonly at the greater sciatic notch but can occur anywhere along the path of the pudendal nerve.

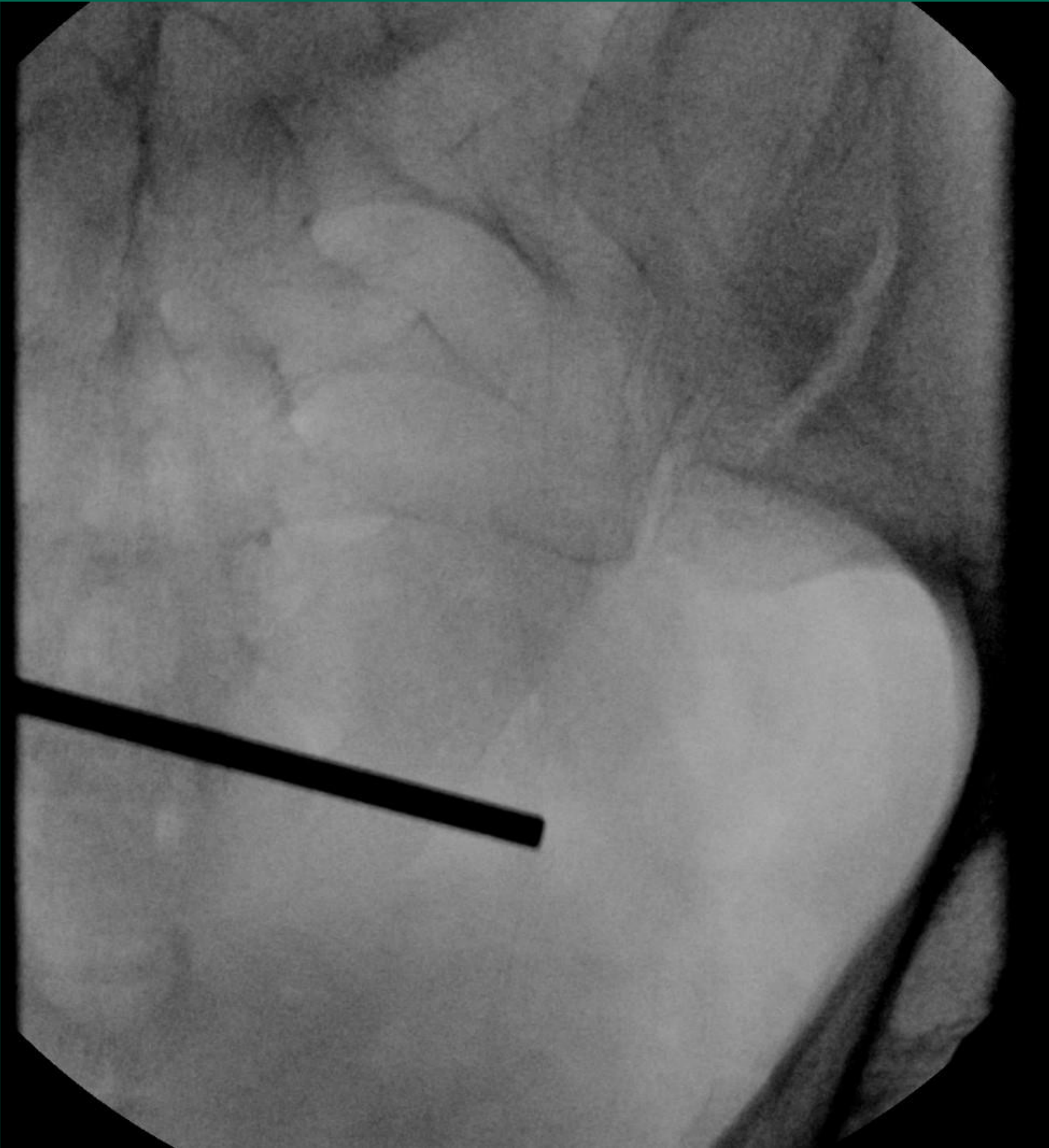
CASE

- 33-year-old male **bodybuilder** with 9 months of right pelvic and penile pain.
- On exam, several **trigger points** were identified in the pelvic floor, suggestive of **PNE due to hypertrophy of pelvic floor muscles**.
- Combined **X-Ray & US** were used to perform TPI with **bupivacaine** and **dry needling**.
- Pain relief has lasted **9 months** thus far.

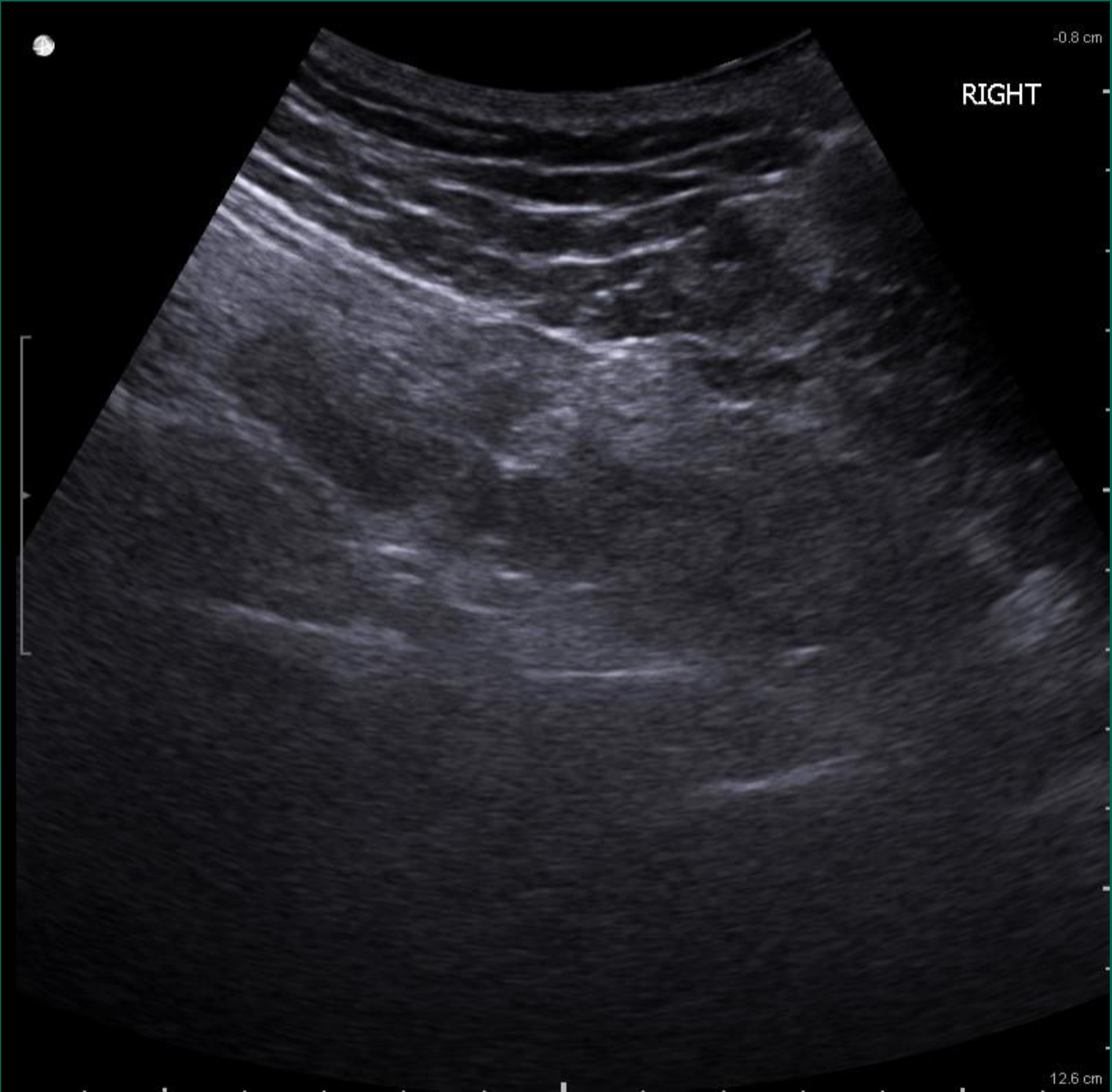
DISCUSSION

- While PNE often occurs at the greater sciatic notch, **pelvic floor hypertrophy** should be considered in patients with **intensive exercise history**.
- **TPI** can be an effective treatment for PNE due to **pelvic floor hypertrophy**.

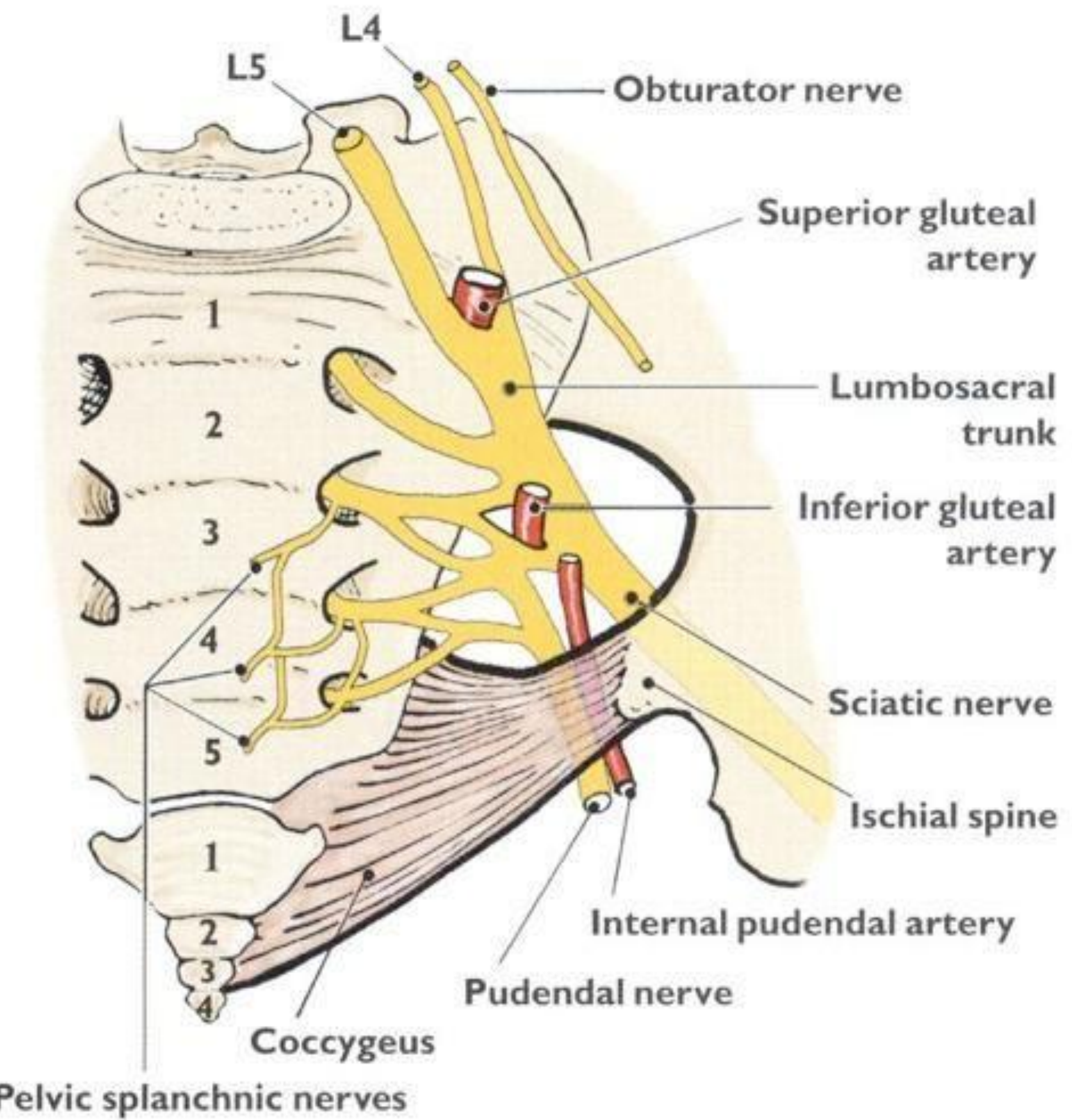
Pudendal nerve entrapment treated with iliococcygeus and coccygeus trigger point injection



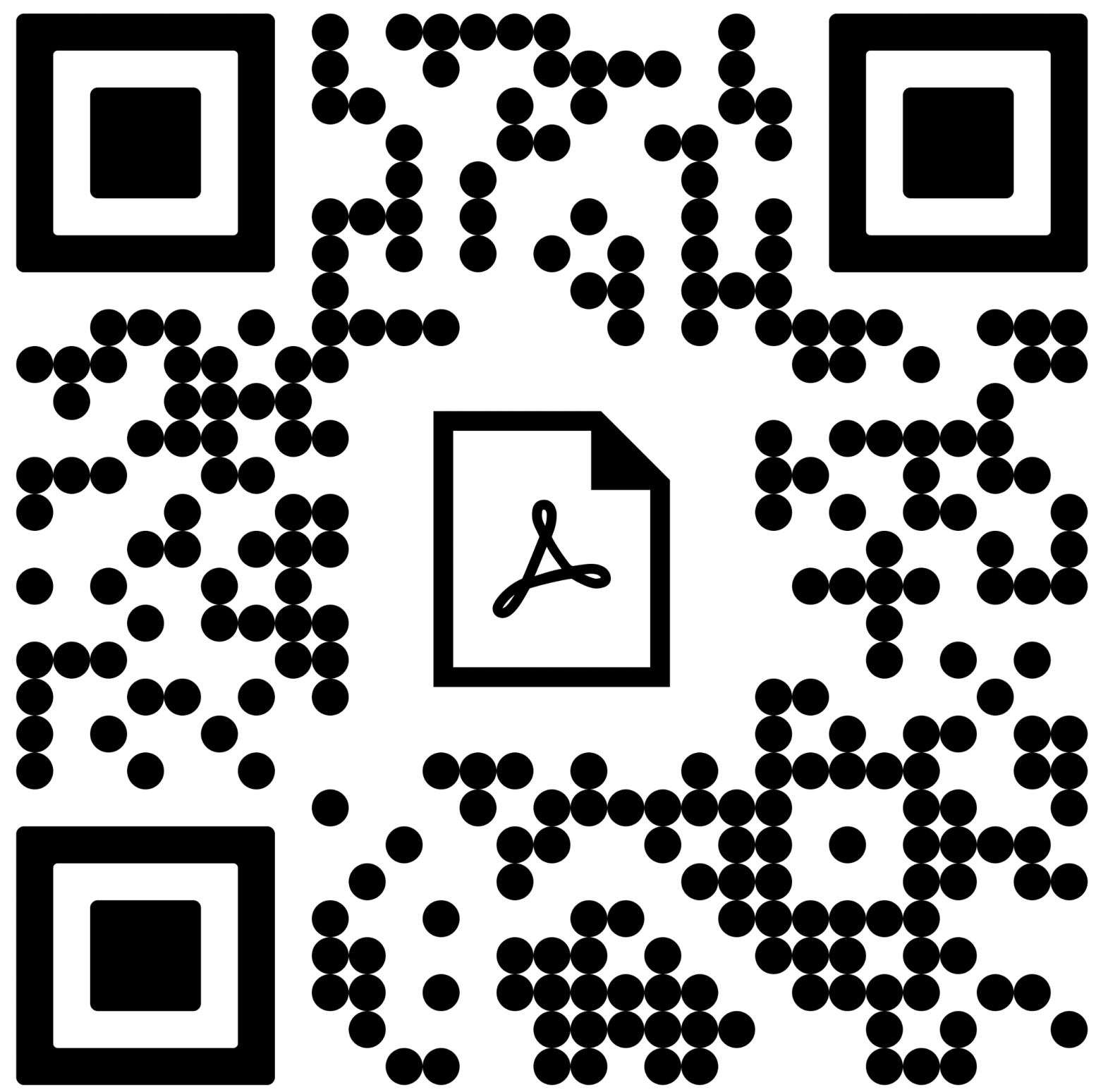
Fluoroscopic identification of the right ischial spine



In-plane ultrasound needling of coccygeus



Pudendal nerve and coccygeus dorsal view¹



Scan for **full abstract**

1 - Gerema U, et al. Anatomical Variations of Internal Iliac Artery and Internal Iliac Vein and their Clinical Significance. J Human Anat 2020, 4(1): 000146.