

Multi-disciplinary Approach to the Study of Chronic Pelvic Pain (MAPP) Networks

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Background

Interstitial cystitis/painful bladder syndrome (IC/PBS) is a chronic pain syndrome defined by bladder pain, often accompanied by urinary frequency and urgency. Despite intensive research, no organ-specific etiology has been identified. Several other chronic pain syndromes may be associated with IC/PBS, including fibromyalgia and irritable bowel syndrome (IBS), the co-existence of these syndromes suggests a common pathophysiology for chronic pain disorders. The use of current diagnostic categories for IC/PBS and other pain syndromes allows overlap in symptoms and objective findings, with often unsatisfactory treatment outcomes.

Objectives

We propose an epidemiological approach to identify and describe specific disease phenotypes, first based on traditional diagnostic groups (IC/PBS, IBS, fibromyalgia) and then on more novel methods utilizing pain symptoms and pain body-map patterns. We hypothesize:

- 1) Comorbidity, risk factor and quality of life (QOL) profiles can be identified which are specific to chronic pain patients, when grouped by diagnoses, symptoms and body-map reported pain;
- 2) A novel body-map tool will be useful to investigate pain patterns and severity independent of diagnoses and symptoms.

Methods

To test these hypotheses, a MAPP multi-center, clinic-based case-control study is proposed with the following aims: 1) To compare the likelihood of co-morbid chronic pain syndromes, risk factors and QOL between patients with IC/PBS, fibromyalgia, and IBS and matched control patients; 2) To compare risk factors and QOL between patients with IC/PBS "only" and patients with IC/PBS and co-morbid fibromyalgia and/or IBS; 3) To determine how chronic pain symptoms cluster, irrespective of diagnosis, and to identify risk factors and QOL associated with membership in pain-symptom clusters; and 4) To qualitatively and quantitatively describe chronic pain syndrome patients' body-map pain phenotypes and to determine risk factors and QOL associated with membership in body-map pain phenotype clusters. The study population will include IC/PBS (344), fibromyalgia (200) and IBS (200) patients, along with age-, gender- and clinic-matched controls (600). Data collection will consist of questionnaires and a body-map tool. By better understanding characteristics specific to different groups of IC/PBS and chronic pain patients, patient

groups may be identified who will benefit from targeted prevention efforts and focused treatment modalities.

Findings

Currently there are no findings to report

Status

The research project is finishing data collection and beginning final analysis.

Support

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