

ANTECEDENTS

ACE's, (adverse childhood experiences) can include birth trauma

Pre-disposing genetics to pelvic pain and vulvadynia

TRIGGERING EVENTS

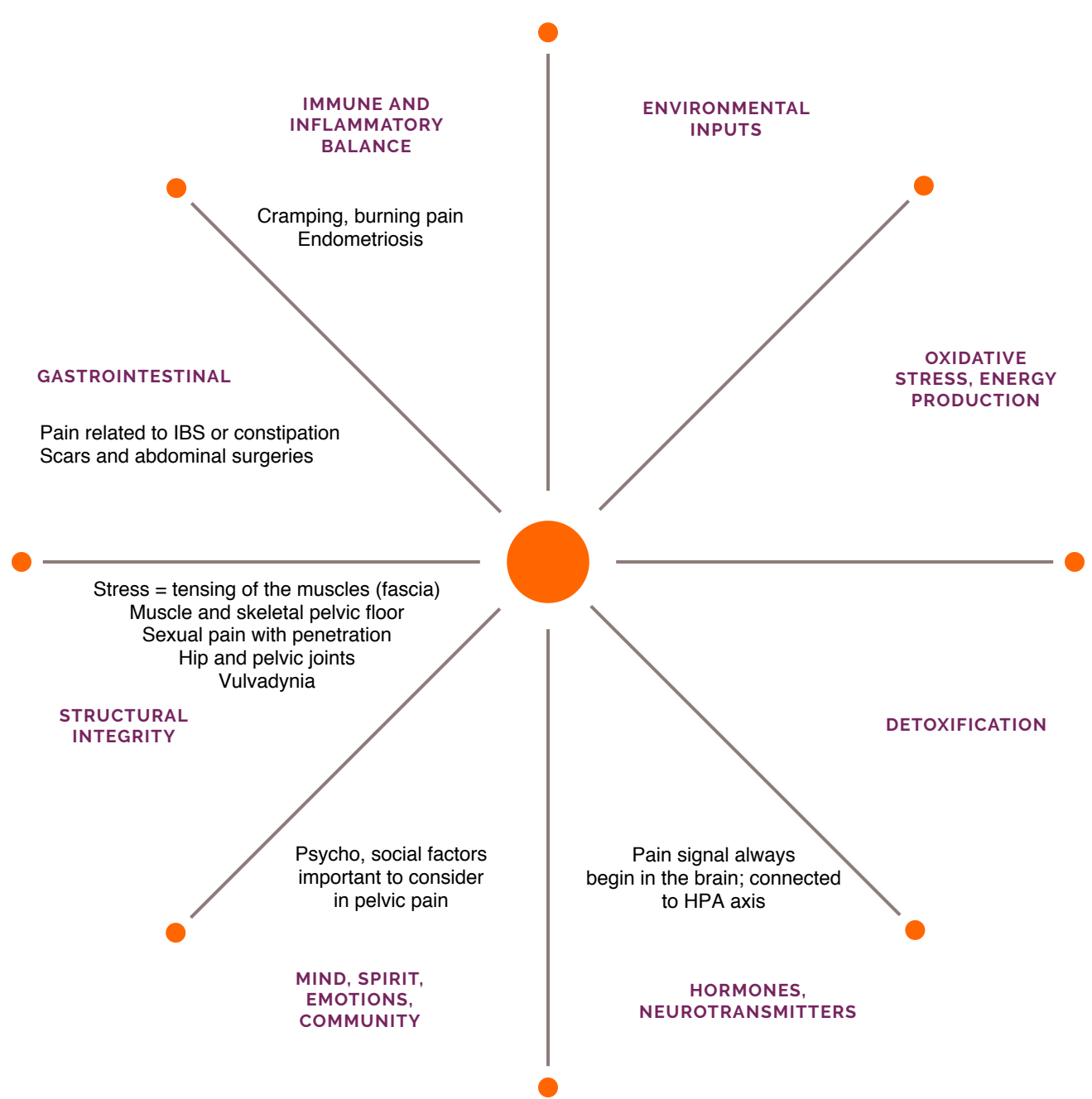
ACE's, (adverse childhood experiences) can include past sexual trauma

History of trauma sets the hypothalamus up to be more reactive, more hyper-vigilant, altering the cortisol response

Current environment that causes stress will lead to increased inflammation and nervous system response to pain

MEDIATORS

Positive Mediators:
+ support the HPA axis
+ have a good, supportive, healing team
+ have access to care that understands your pain
+ anti-inflammatory diet specific to patient needs
+ pelvic floor physical therapy



SLEEP/RELAXATION

Critical for restoring the HPA axis and restoring adrenal health

EXERCISE/MOVEMENT

Don't over exercise
Do restorative like exercises

NUTRITION/HYDRATION

Eat an anti-inflammatory diet (specific to individual needs)

STRESS/RESILIENCE

Stress can impact and increase the pain and frequency -- introduce stress reduction techniques
Stress resilience is helpful for any chronic pain situation

RELATIONSHIPS/NETWORKS

Community and a good supportive health team, family, friends and support group that understand can be key when not triggering further fear