

Disabling pregnancy-related lumbopelvic pain: when early diagnosis matters - A case report

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Abstract

Back and pelvic pain during pregnancy (Pregnancy-Related Lumbopelvic Pain) is a common and usually benign syndrome that affects many women during the period of pregnancy and childbirth. Therefore, most women do not undergo a thorough medical examination, even if they are suffering from pain and their functional abilities are significantly compromised. In the absence of a basic medical diagnosis and acceptable medical screening, women suffering from severe painful pathologies, which endanger their quality of life and long-term physical functioning are rarely identified. Among such rare pathologies in pregnancy are transient osteoporosis of the hip during pregnancy (Transient Osteoporosis Hip-TOH) and osteoporosis of pregnancy and lactation.

In this article, a patient suffering from both of these rare pathologies is presented. To the best of my knowledge, this combination has not yet been presented in the literature. This made it more difficult to manage the case, due to the pathologies' different etiologies and conflicting treatment recommendations.

The functional limitations of the woman under discussion, together with the clinical findings of the patient's physical examination, provided initial indications as to the existence of these rare pathologies. The final diagnosis was made with the help of MRI imaging - a limited resource that is distributed sparingly,

particularly during pregnancy. Because of this, a thorough clinical examination by the treating physical therapist can be a first step towards an accurate and early diagnosis, which may prevent future complications. With the institution of direct access to physical therapy, awareness of these pathologies and their red flags is critical.

In the absence of targeted medical literature regarding the treatment of each pathology separately and particularly when they appear together, the treatment of both conditions in a single woman posed a significant challenge. Decision-making regarding treatment was based on repeated examinations and monitoring of the progress in terms of pain and functional ability, while relying on the biopsychosocial model. Currently, the patient is improving steadily and continues her physical therapy rehabilitation program.

Keywords: Pregnancy-Related Red Flags, Pregnancy-Related Lumbopelvic Pain- PLPP, Transient Osteoporosis Hip-TOH, Osteoporosis of Pregnancy and Lactation