



BIOFEEDBACK SOCIETY OF WISCONSIN

MEMBER NEWSLETTER

Web site: www.biofeedbackwi.org

Summer 2006

BSW Fall 2006 Conference Planners Embrace AAPBs Special Issue on Pelvic Floor Disorders

TROUBLE AT THE CORE

Treating the Whole Person at the Most Intimate Level

By: *Karen Rauen, BCIAC, PMDB, BSW Board Member*

This issue of the BSW Member Newsletter is devoted entirely to the psychophysiological assessment and treatment of pelvic floor disorders. This special edition was prepared to heighten the awareness and utilization of biofeedback treatment protocols for pelvic floor disorders. Such disorders include vulvar or prostatic pain, sexual dysfunction, or incontinence, resulting in high medical costs, decreased activity, and decreased quality of life.

This timely special issue has helped validate the BSW Conference Planning Committee's focus on pelvic floor disorders. It is estimated millions of Americans

suffer from pelvic floor disorders. This year, the BSW Fall Conference will be held on Sept. 15 and 16 in the greater Milwaukee area. It will feature speakers who are experts in pelvic floor disorders and cover some similar as well as different topics than those discussed in the special issue.

You may be asking, "Why should this topic area be of interest to me?" People are often too embarrassed to talk about pelvic floor disorders, even with their primary care physicians. Whatever the problem for which your patient is being treated, you will want to know if any disorder of the pelvic floor is

complicating their response to your treatment protocol. If it is interfering with the response, knowing how to best help the patient is important. Likewise, good resources for referral services are also imperative.

Mark your calendars now, and plan to attend the Biofeedback Society of Wisconsin's annual conference. If you are on our mailing list, you will be receiving a detailed brochure soon. Share it with others, and encourage your colleagues to attend.

If you have not received a brochure and would like one, please notify someone on the planning committee.

Think 2006 BSW Conference: Excellent Speakers Are Scheduled

By: BSW President Suzie Franklin

The BSW Conference for 2006 will be held on Friday, Sept. 15 and Saturday, Sept. 16 at the Sheraton Hotel, Brookfield, Wis. The event will address the assessment and treatment of pelvic floor pain disorders. The conference will feature Jeanette Tries, PhD, on Friday. She will speak on pelvic pain and the use of biofeedback. Saturday will include panels of multi-disciplinary speakers, who will address relaxation, psychotherapeutic, and medical strategies to treatment of pelvic floor disorders. In the afternoon, specific cases will be discussed by area occupational and physical therapists.

The conference will be appropriate for occupational therapists, physical therapists, nurse practitioners, physicians, psychologists, marriage and family therapists, and counselors. Brochures describing the speakers and content will be out for sign-up in the near future.

*Mark your
Calendar!*

Pediatric Headache: Several Factors to Consider at Assessment

By: Tamara M. Fennig, R.N., M.S., C.P.N.P.
Pediatric Neurology

(Part one of a two-part article)

Migraine and tension-type headache are two common headache disorders treated in a primary care setting. As many as 20 percent of primary care visits are related to headache. In pediatrics, by age 15 years, 80 to 90 percent of children will have had a "significant" headache. Also by this age, 15 percent will have experienced a migraine, with another 15 percent having had daily or almost daily tension type headache.

In children and adolescents, migraine headaches are described as a pulsating or throbbing pain, moderate to severe in intensity (6 or higher on a 10-point pain scale), usually located in the frontal or bitemporal region. Duration of the pain is 10 to 48 hours. The pain may be exacerbated by routine physical exertion. The pain is associated with sensitivity to light and/or sound, and nausea and/or vomiting.

By contrast, the tension type headache is a dull, persistent "pressure" pain (5 or less on a 10-point pain scale). It may be described as a band-like squeezing pain that encircles the head. The pain is non-progressive, may wax and wane over time, and is not exacerbated by physical activity. Duration of tension type headache can vary from 30 minutes to several days at a time. Sensitivity to light or sound may occur, but not both. Nausea and/or vomiting are not present. It is often associated with stress and fatigue.

A third phenomenon seen in both primary and tertiary care is analgesia rebound headache. This type of headache is produced by overuse of pain medications, more than two to three times per week, over as little as six weeks. The pain of rebound headache is similar to tension headache, but may progressively worsen over time. As will be

discussed later, if headaches occur more than once weekly, preventative therapy should be initiated to avoid analgesia rebound headache. Once rebound has occurred, it may take weeks to months to resolve, even with daily prophylaxis.

(Be sure to watch for the next issue of the (BSW Member Newsletter to read part two of this informative article.)

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BSW Treasurer Provides Report

By: Robert Hodes


Checking: \$5500.74 Checking is free if we maintain a balance over \$4000, otherwise \$9 per month.

Deposits: \$650. We have 10 checks for annual dues renewals to be deposited.

CD: \$3230.34 due 4/2/06. Plan is to rollover into six-month CD.

The CD will be due in 10/06. We can then roll this over to a one-year CD, and that will always give us a CD due in October. In an emergency, this could be used to pay conference expenses.

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Tooting the Board's Horn: A Great Group of Professionals

By: Shelly Vanness

I have been the BSW Board of Directors' Secretary for three years now, and I would like to take this opportunity to say something.

Having been a pediatric OT for 20 years prior to joining the Biofeedback Practitioner arena, I was used to rather territorial type professionals in the pediatric PT, OT, and speech therapy world. When I first joined BSW in 1998, I noticed immediately how warm and friendly and willing to share knowledge this group of people tended to be.

That has continued to be the case including with the board members. I have found it very interesting to get to know the board members as professionals and as people with a common goal of helping patients be healthier in their choices and understanding of their mind-body connection.

The board meets approximately four times during the year to plan the annual conference, and it is an excellent way to meet some very special people and give back to your profession. I am grateful to have had the chance!



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