FOR IMMEDIATE RELEASE

New Endometriosis Treatment – No Surgery or Drugs

New Orleans, LA. 11/2/06 Scientists at the Annual Meeting of the American Society for Reproductive Medicine (ASRM) reported encouraging findings on a new treatment for endometriosis pain using a pelvic physical therapy that feels like a deep massage. Until now, the primary treatments for endometriosis pain have involved either surgery or drugs.

The manual physical therapy (Wurn Technique®) decreased pain throughout the menstrual cycle. Relief continued six weeks after therapy, according to an abstract published in “Fertility and Sterility” (9/2006). A related abstract in the same issue reported the therapy significantly decreased dyspareunia (intercourse pain) and improved sexual function for women with endometriosis.

“Endometriosis can cause severe pain, disrupt lifestyle and contribute to infertility for millions of women worldwide. Unfortunately, there is no known cure,” said co-author, research gynecologist Richard King, former Chief of Staff of North Florida Regional Medical Center in Gainesville, Florida.

Endometriosis is thought to occur in about 10% of adult females, with a higher incidence among infertile women. In an earlier published study (“Medscape General Medicine,” 6/2004), the therapy improved pregnancy rates for patients undergoing in vitro fertilization (IVF) and appeared to improve natural fertility rates.

The treatment is of interest because it decreased pain without the risks associated with surgery or pharmaceuticals. The manual therapy “feels similar to a deep massage, but the mechanism is totally different,” according to author, physical therapist Belinda Wurn. “We are encouraged by the results and will expand this study.”

Wurn began developing the treatment with her husband in 1987 to help her recover from painful adhesions following pelvic surgery. Her spouse and co-author, Larry Wurn says, “The therapy appears to break adhesive crosslinks that form when a patient heals from injury, infection, surgery or inflammation.”

“Adhesions are commonly associated with endometriosis and are implicated in many chronic pain conditions,” explains Dr. King. “This therapy is a natural adjunct to gynecologic care and should be considered by physicians whose patients have endometriosis, dyspareunia, or chronic pain.”

The therapy was developed to treat chronic pain but has since expanded to treat infertility, endometriosis, and sexual dysfunction. The therapy is available at Clear Passage Therapies® clinics throughout the United States. (see www.clearpassage.com)

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Therapists, physicians, patients are available for interview. Hi-res photos, graphics, b-roll video available. Contact: Amy Burnette, ph 352.336.1433, amyb@clearpassage.com