



Helen – Chronic abdominal pain

Surgery to correct a problem with her bowel should have meant an easier life for Helen, who immigrated to Australia from the Welsh Valleys eight years ago. Instead, it led to years of agonising pain, an extended period away from work, and a search to find an alternative to the medications that were aggravating her condition.

After suffering with bowel problems that restricted her lifestyle, Helen was forced to take extended time off work for surgery. Unfortunately there were problems – and shortly after the procedure Helen lost a kidney. She also found that she was now suffering from bowel dysmotility, where the bowel does not push food through the system effectively, causing excruciating and debilitating pain.

Modifying her diet was the first treatment attempted and Helen was restricted to liquids. This lasted for about two years, during which time she experienced a dramatic weight loss – her weight fell to a tiny 49 kilos – and she realised she had to find another solution.

“I was put on a drug that kept me out of strife, because it made my bowel work. Unfortunately they’ve taken that off the market and it’s not available to me.”

The drug worked by accelerating the emptying of stomach contents. But in 2000 it was found to cause dangerous irregular heart rhythms, and was withdrawn from sale.

Helen began to manage her pain by taking paracetamol and codeine but her agonising problem worsened.

“The food wasn’t moving through my bowel properly. It was taking a week or two to come through. I’d just wind up in hospital every two weeks having a bowel prep.”

She made the decision to have surgery to treat her bowel problem, and was given an ileostomy, where a surgically created opening is made in the abdominal wall for the food to pass through. A bag is connected to the outside of the body to collect the waste. The operation was a success in managing her bowel function.

“I have to say, in all honesty, that is the best thing I have had done. It means I can go out of the house again and, unless I do something silly, I have things under control.”

The procedure did not, however, solve her pain problem. She continued taking codeine-based over-the-counter painkillers. Eventually she found out that the medications were actually making her problem worse – they slowed down her bowel function, causing even more pain.

Helen’s doctor prescribed her a different class of painkiller, but she became uncomfortable with relying on strong medication and began to look for a non-drug option, such as spinal cord stimulation.

“I went back to see my doctor who told me that they do have an implant but it’s not for everybody.

“I thought I’d give it a try.”

A procedure to implant a stimulator is typically done in two stages. The first positions the leads and uses an external stimulator to test if the treatment is going to be effective. If this trial is effective, the neurostimulator is implanted a few days later.

"I was told that they would just put it in and leave it on a box outside to see whether it worked. But it worked so well on the operating table that we went straight in for the full implant."

In Helen's case, the effect of the neurostimulation was instant. At times she is now pain-free.

"Sometimes the pain is so bad that the machine can only take the edge off it. But at other times the pain is gone completely."

At first, Helen restricted her use of the stimulator to "every now and then", but she found that she was still in pain. Her doctor has recommended that she uses it all the time.

"With the implant being there it doesn't hurt, but it's a bit sensitive at times. It feels like I've got pins and needles. I can just feel it tingling."

Helen is back at work and has maintained her positive outlook throughout her ordeal. She does have to be strict about what she eats, as many foods can aggravate her bowel condition.

"The biggest thing is no fibre – all protein. I had a little piece of broccoli one day and ended up in hospital."

"I've never been a depressed person, at all, even all through this, and I feel that I can now walk past a patisserie and say 'yes, they're lovely but they're not for me'. I'd rather have a good life and eat well."

And the best part for Helen is that she is now off pain medications.

"The machine gave me the confidence to go off the drugs."

"I have a problem there and medication can aggravate it. Taking the edge off the pain without narcotics is fine. I keep off medication completely now."