

Kevin C. Petersen, M.D.

November 13, 2023

Regarding: Patients suffering hernia mesh pain, female pelvic mesh and metallic vascular stents

To whom it may concern,

I have taken care of patients with hernia mesh pain for 27 years, 4 years before this problem was even reported in the medical literature. I have been asked by these patients on many occasions to explain to their doctors, employers and loved ones the terrible and isolated plight of a patient suffering hernia mesh pain. This is not taught in medical school or post graduate training and is not well documented in the medical literature. For now, just consider what I have to say. This is an open letter in support of patients with severe chronic hernia mesh pain. The most important thing that I can tell you is what was told to me many years ago, "be kind".

Understanding the difficulties a patient with hernia mesh pain faces requires limitless compassion. In the early years of my practice I did not understand these patients. I gained knowledge by listening to patients. What they tell you will not make sense to you at first. The standard paradigm for understanding chronic pain is primitive, not taking into account central nervous system processing and the phenomenon of central pain sensitization. Their stories are further complicated by A.S.I.A. syndrome creating disjointed symptoms such as severe chronic fatigue, G.I. disturbances, joint pain and many other symptoms.

Their pain is real, although there is no objective evidence of it. The patient's broad complaints appear emotional and goal seeking. Medical imaging gives no insight. Findings on physical examination make no sense in terms of peripheral neural anatomy.

20% of patients with hernia mesh develop chronic pain. 5% of patients develop pain so severe that it interferes with routine daily activities, responsibilities and joie de vivre.

A very common theme that I see time and time again in patients with severe chronic pain caused by hernia mesh is that their doctors fail to diagnose, treat or give hope. With no physical diagnosis everyone's compassion quickly evaporates. Patients are told there is nothing wrong and that is all in their head. A doctor's history taking, physical examination and a flurry of medical imaging tests and laboratory testing most often leads nowhere. Typically, these patients have seen multiple doctors which just reinforces their image of drug seeking, eroding their confidence in doctors and hope.

This failure of their doctors to diagnose then leads to loss of understanding and compassion in employers and family and society in general. They are branded as drug seekers and are shunted off to pain clinics.

This situation piles on devastating loss for a patient already in pain.

If you would like more in depth information, please scan the QR box code below and go to my website. I share more of my experience and references for peer reviewed medical journal articles.



Sincerely,

A handwritten signature in black ink that reads "Kevin Petersen". The signature is fluid and cursive.

Kevin C. Petersen, M.D.