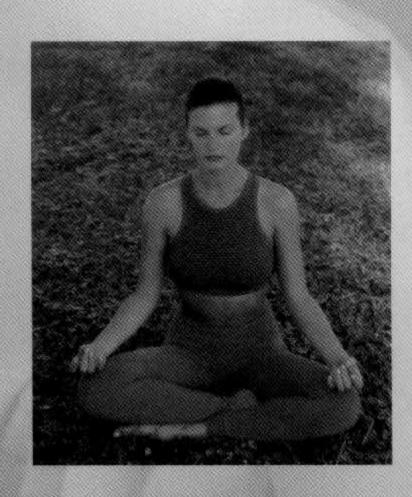
Dysmenorrhea



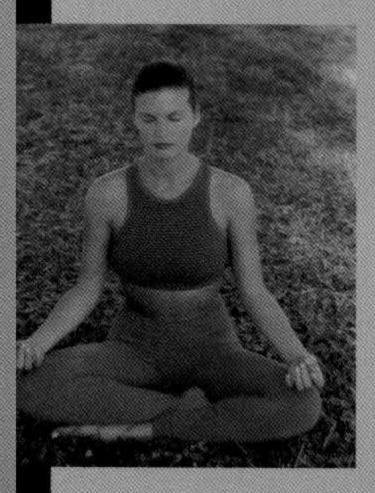


ACOG PATIENT EDUCATION

ore than half of women who have menstrual periods have some pain for at least 1–2 days each month. Usually, the pain is mild. Sometimes, however, the pain is severe enough to keep them from their normal activities. When the pain is this severe, it is called dysmenorrhea. Dysmenorrhea is common. Painful periods are the leading cause of women missing work and school.

This pamphlet tells you about:

- The symptoms and causes of dysmenorrhea
- How you can help relieve the pain

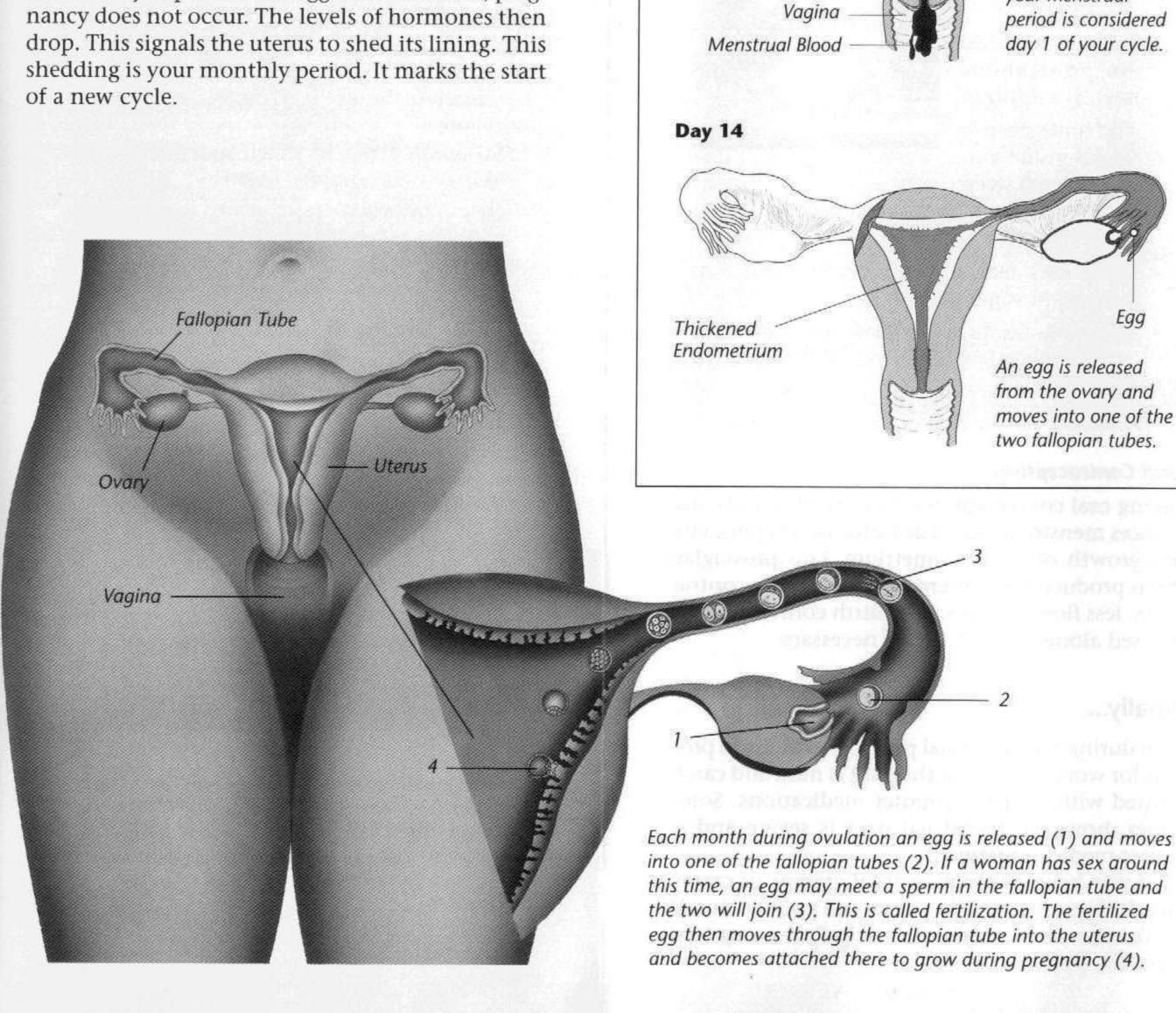


Pain during the menstrual period is a common problem for women. Most of the pain is mild and can be treated with over-the-counter medications.

The Menstrual Cycle

The menstrual period begins with the first day of bleeding of one period and ends with the first day of the next period. An average menstrual cycle lasts about 28 days.

During the menstrual cycle, estrogen and progesterone-two hormones made by the ovariescause changes in the endometrium (the lining of the uterus). On about day 14 of your cycle, an egg is released from one of the ovaries. This is called ovulation. The egg moves into one of the two fallopian tubes connected to the uterus where it can be fertilized by a sperm. If the egg is not fertilized, pregnancy does not occur. The levels of hormones then of a new cycle.



The Menstrual Cycle

Day 1

Endometrium

Uterus

Day 5

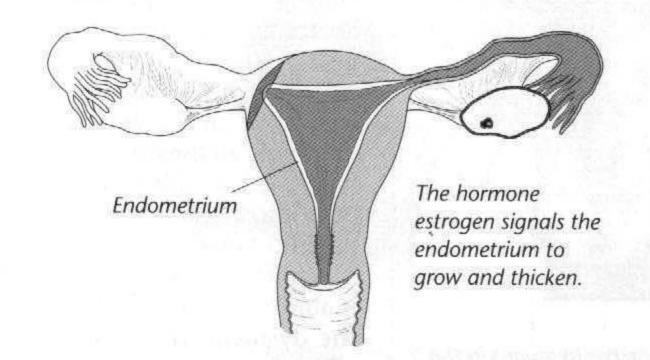
Fallopian Tube

Ovary

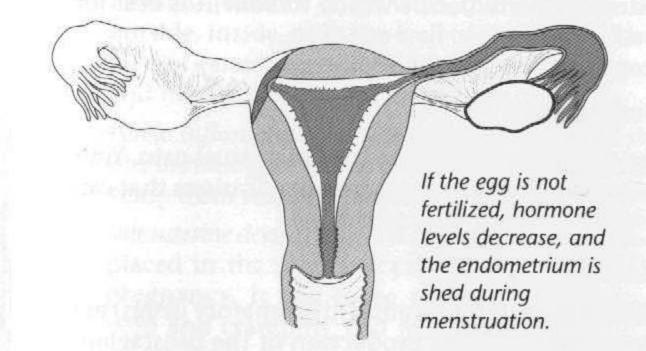
Egg

The first day of

your menstrual



Day 28



Causes of Menstrual Pain

The uterus is a muscle, and like all muscles, it contracts and relaxes. This happens throughout the menstrual cycle. During your period, the uterus contracts more strongly. These contractions are caused by prostaglandins—a substance made by the endometrium. Sometimes, when the uterus contracts it produces a cramping pain.

Before your period, the level of prostaglandins in your body increases. Prostaglandin is released when your period starts. As you menstruate, prostaglandin levels drop. This is why pain tends to lessen after the first few days of your period.

Types of Dysmenorrhea

There are two types of dysmenorrhea. Pain during your period can be classified as either primary or secondary dysmenorrhea.

Primary Dysmenorrhea

Primary dysmenorrhea is pelvic pain that is the result of having your period. Women with primary dysmenorrhea may have any of the following symptoms:

- Cramps or pain in the lower abdomen or lower back
- · Pulling feeling in the inner thighs
- Diarrhea
- Nausea
- Vomiting
- Headache
- Dizziness

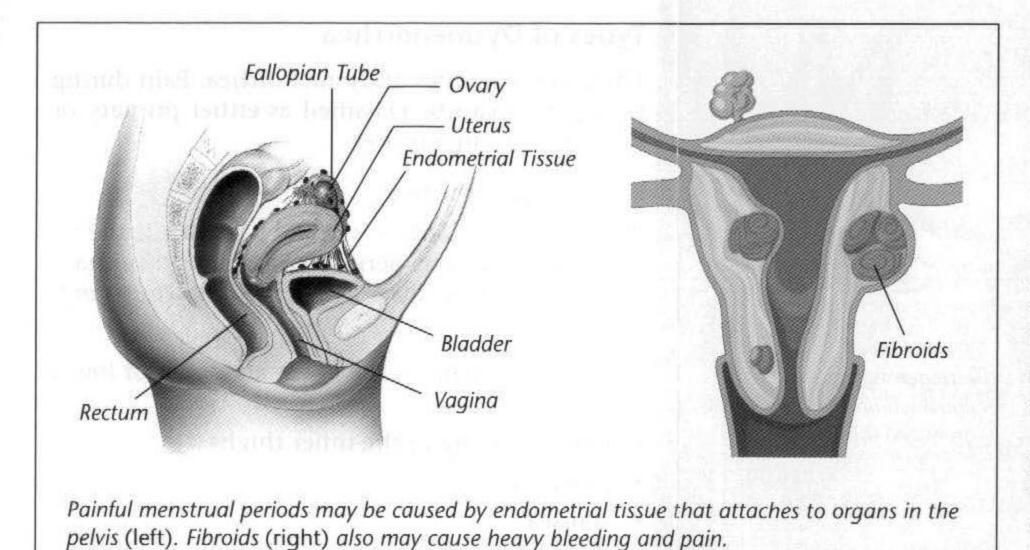
Primary dysmenorrhea often begins soon after a girl begins having menstrual periods. As a woman gets older, her periods often become less painful. The pain may lessen after a woman gives birth. Not every woman is the same, however, and some do continue to have pain during their periods. Some cycles may be more painful than others.

Secondary Dysmenorrhea

Secondary dysmenorrhea is menstrual pain that has another cause in addition to menstruation. With secondary dysmenorrhea, pain often begins earlier in the menstrual cycle. It usually lasts longer than normal cramps. For example, it may begin long before your period starts, it may get worse with your period, or it may not go away after your period ends.

Some of the most common causes of secondary dysmenorrhea are:

 Endometriosis—a condition in which endometrial tissue is found in other areas in the body, such as the ovaries and fallopian tubes. This tissue acts like tissue in the uterus. Endometrial tissue outside the uterus responds to monthly changes in hormones the same way it does inside the uterus. It also breaks down and bleeds. This bleeding can cause pain, especially during your period.



- Fibroids—tumors or growths that form on the outside, inside, or in the wall of the uterus. They are not cancerous, but they can cause more pain and heavier bleeding with periods.
- Pelvic inflammatory disease—an infection of the uterus, fallopian tubes, or ovaries. Most cases develop from sexually transmitted diseases (STDs).
- Intrauterine device (IUD)—a device placed in the uterus to prevent pregnancy. It can cause pelvic pain and cramping and may make normal menstrual cramps worse.

Diagnosing Dysmenorrhea

Dysmenorrhea is diagnosed by exams and tests. Some of the tests may need to be done outside the doctor's office.

For your doctor to diagnose a cause for dysmenorrhea, you will be asked to describe your history, symptoms, and menstrual cycles. Your doctor will then do a pelvic exam to check for anything abnormal in the reproductive organs. A *Pap test*, cultures, and blood samples may be taken. An *ultrasound* exam of the pelvic organs may also be done to further check for anything abnormal.

In some cases, the doctor can learn more by looking directly inside your body. This is usually done by laparoscopy. Laparoscopy is often done with

general anesthesia. This requires admission to an outpatient surgery unit, or even to the hospital. During laparoscopy, the doctor makes a small cut near your navel. A thin lighted scope—a laparoscope—is then inserted into your abdomen. The laparoscope allows the doctor to view the pelvic organs.

Sometimes, the doctor is able to find a cause for the dysmenorrhea. But, often there is no known cause. Based on the results of the tests, you and

your doctor will decide which treatment is best for you.

Medications

There are effective ways to treat menstrual pain. Your doctor can prescribe or suggest medications that can help relieve your discomfort.

NSAIDS

NSAIDs (nonsteroidal anti-inflammatory drugs) are drugs that block the production of the prostaglandins that cause menstrual cramps. These drugs also can prevent the other symptoms caused by prostaglandins, such as nausea, diarrhea, and pain. You can buy most NSAIDs, such as ibuprofen or naproxen, over the counter. If these do not relieve your pain, talk to your doctor. He or she may prescribe some stronger medications.

NSAIDs work best when they are taken at the first

sign of your period or pain. You usually need to take them only for 1 or 2 days. Do not take more pills than the package recommends. You should avoid taking NSAIDs while drinking alcohol. Women with bleeding disorders, liver damage, stomach disorders, or ulcers should not take NSAIDs.



Finding Relief

Besides medical treatment that your doctor may suggest, there are things you can do on your own to help ease the pain of your periods:

- Exercise—Women who exercise regularly often have less menstrual pain. Aerobic exercise, such as walking, jogging, biking, or swimming can be helpful.
- Apply heat—A warm bath or a heating pad or hot water bottle on your abdomen is soothing.



- Get some sleep— Making sure you get enough sleep
 - before and during your period can help you cope with any discomfort.
- Have sex—Orgasms can relieve menstrual cramps in some women.
- Relax—Relaxation exercises, like meditation and yoga, can increase your ability to cope with pain.

Oral Contraceptives

Taking oral contraceptives (birth control pills) also reduces menstrual pain. The birth control pill causes less growth of the endometrium. Less prostaglandin is produced, and there are fewer strong contractions, less flow, and less pain. Birth control pills can be used along with NSAIDs if necessary.

Finally...

Pain during the menstrual period is a common problem for women. Most of the pain is mild and can be treated with over-the-counter medications. Sometimes, however, menstrual pain is severe and requires medical treatment.

If you have severe menstrual cramps or cramps that last more than 2 or 3 days, call your doctor. He or she can examine you and help find a way to relieve the pain.

Glossary

Dysmenorrhea: Discomfort and pain during the menstrual period.

Estrogen: A female hormone produced in the ovaries that stimulates the growth of the lining of the uterus.

Pap Test: A test in which cells are taken from the cervix and vagina and examined under a microscope.

Progesterone: A female hormone that is produced in the ovaries and matures the lining of the uterus. When its level falls, menstruation occurs.

Prostaglandins: Chemicals that are made by the body that have many effects, including causing the muscle of the uterus to contract, usually causing cramps.

Ultrasound: A test in which sound waves are used to examine internal organs.

Uterus: A muscular organ located in the female pelvis that contains and nourishes the developing fetus during pregnancy.

This Patient Education Pamphlet was developed under the direction of the Committee on Patient Education of the American College of Obstetricians and Gynecologists. Designed as an aid to patients, it sets forth current information and opinions on subjects related to women's health. The information in this pamphlet does not dictate an exclusive course of treatment or procedure to be followed and should not be construed as excluding other acceptable methods of practice. Variations taking into account the needs of the individual patient, resources, and limitations unique to the institution or type of practice may be appropriate.

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