



Inanna Women's Health

A/P Batool S Nadim

Obstetrician, Gynaecologist & Sonologist

## Chronic pelvic pain

### WHAT IS CHRONIC PELVIC PAIN (CPS)?

Pain felt in lower abdomen of 6 months duration. The pain could or could not be associated with menstrual cycle

### DEFINITIONS

Dysmenorrhea : pain felt with the onset of menstrual cycle

Dyspareunia: pain with sex

Dyschasia: pain with opening the bowel

Dysuria: pain with passing urine

### CAUSES;

CPS can be associated with gynecological or non- gynecological conditions, many of these interact with each other which makes the origin of pain multifactorial

### THE MOST COMMON CAUSES OF GYNECOLOGICAL ORIGIN

- Endometriosis
- Chronic pelvic inflammatory disease
- Premenstrual tension

### THE MOST COMMON NON GYNECOLOGICAL PROBLEM

- Musculoskeletal pain
- Painful bladder syndrome (interstitial cystitis)
- Pelvic adhesions (Previous surgeries like appendix, cesareans)
- Irritable bowel syndrome
- Psychological disorders

### ENDOMETRIOSIS

Is a condition where the lining of the uterus (the endometrium ) grows outside the uterus .It implants itself on the peritoneal surface anywhere inside the abdominal cavity including the ovaries, fallopian tubes, bladder, bowel and pelvic sidewalls

As the lining of the womb (uterus) is sensitive to the hormone stimulation, these implants behave the same but instead of shedding away with each menstrual cycle and going out through the vagina they grow to form cysts that ultimately burst and causes adhesions which is very painful



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## CHRONIC PELVIC INFLAMMATORY DISEASE

This occurs after an infection (usually sexually transmitted) happens inside the pelvis. It results in inflammation and adhesion formation that lead to pelvic organs been stuck together.

## PREMENSTRUAL TENSION

Is a condition which is set to present in the 7-10 days leading up to the onset of the menstrual cycle

It usually present with abdominal bloating, mood swings and pain

## HOW CHRONIC PELVIC PAIN DIAGNOSED?

The best way to identify origin of CPP is to keep a pain diary for at least 3 months and show it to your doctor( please see attached example)

It will clearly show the relationship with your cycle and if any associated symptoms like burning micturition ,nausea ,bloating .....extra will give more clues on the possible cause

Talk to you doctor about the character of pain (cramping, shooting ,pressure like or dull pain ) and try to score the pain severity on scale of 1-10

It will entail running some tests namely ultrasounds and hormonal assays, other modalities may be used like CT scan and MRI

## HOW CPP TREATED?

Treatment of CPP involves close collaboration between you and your doctor, it is important to talk to your doctor openly about your pain and modalities of pain

It is important to understand the basics of your condition

may take several visits. Sometimes involvement of doctors from other specialties like colorectal surgeons or endocrinologist

Some conditions may need surgery