



CHRONIC PELVIC PAIN

A Guide for Women

Chronic pelvic pain (CPP) is ongoing pain in the lower abdomen or pelvis. It is not caused solely by menstruation or sexual intercourse, although either can aggravate the condition. CPP is not related to pregnancy. CPP is common, affecting about one woman in six. It tends to occur most often in women of childbearing age. CPP is not a disease or a diagnosis, but rather a symptom. The cause can be difficult to diagnose. Sometimes, no cause can be found. It often consists of several disorders that occur at the same time. One difficulty is that no two women with CPP have the same experience of pain.

POSSIBLE CAUSES OF CHRONIC PELVIC PAIN

The following list is a summary of common causes. CPP may be caused by other conditions.

Disorders of the female pelvic organs

- Endometriosis: the growth of endometrium (tissue that normally lines the uterus) in the pelvis, outside the uterus. This is the most common gynaecological cause of CPP.
- Pelvic inflammatory disease (PID): an infection of the fallopian tubes, ovaries or uterus.
- Adhesions: bands of scar tissue that may form after injury, infection or surgery. For example, abdominal adhesions may restrict the movement of the intestines or pull on a pelvic organ. Pelvic adhesions may twist a fallopian tube, causing pain. Minor adhesions do not cause CPP.
- Retained ovary syndrome: an ovary that remains after surgery to remove the uterus.
- Ovarian cysts have often been blamed for causing CPP but do so rarely.
- Cysts due to endometriosis may cause pain because they are often linked to scar-tissue adhesions and endometriosis.

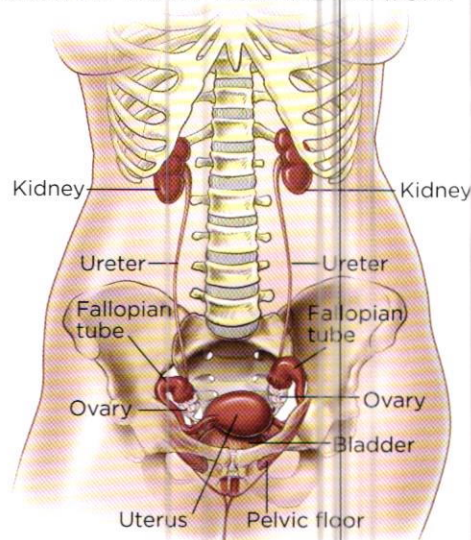
Disorders of the urinary tract

- Interstitial cystitis – inflammation of the bladder lining that can cause scarring and ulceration of the bladder. This is the most common urologic cause of CPP.
- Bladder neoplasm – abnormal growth in the bladder that may be benign (non-cancerous) or malignant (cancerous).
- Urethral syndrome – inflammation of the urinary tract that causes symptoms similar to urinary tract infection.

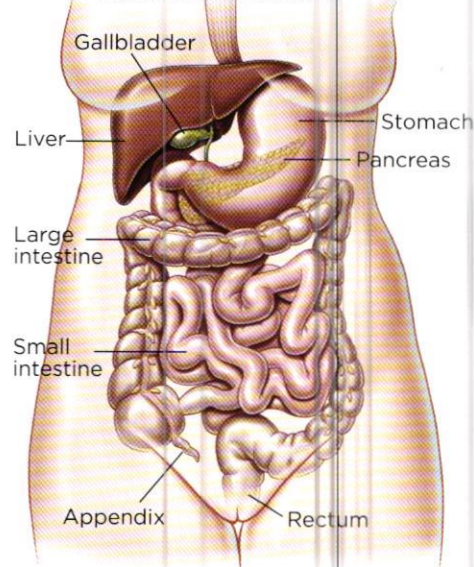
Disorders of the gastrointestinal tract

- Irritable bowel syndrome – the most common gastrointestinal cause of CPP. Symptoms include abdominal pain, alternating diarrhoea and constipation, and mucus in the stool. Painful sexual intercourse can also occur with irritable bowel syndrome.
- Chronic constipation.
- Inflammatory bowel disease – inflammation of the small and large intestines.
- Diverticular disease – a condition where weakened sections of the intestinal wall allow pouches to form. Food trapped inside the pouches may cause inflammation and infection.
- Coeliac disease (intolerance to gluten).

FEMALE PELVIC ORGANS AND URINARY TRACT NORMAL ANATOMY



GASTROINTESTINAL TRACT NORMAL ANATOMY



Disorders of the musculo-skeletal system

- Poor posture, particularly for women who have a sedentary lifestyle.
- Weakened muscles, particularly those of the pelvic floor and lower abdomen; muscles may be weakened due to chronic constipation, childbirth, overstretching with obesity, or lack of exercise.
- Trigger points (irritable and painful spots in a tightened area of skeletal muscle); they can be in the abdominal wall or pelvic floor muscles.
- Fibromyalgia – chronic muscle pain that has no obvious cause.

IMPORTANT: FILL IN ALL DETAILS ON THE STICKER BELOW

DEAR DOCTOR: When you discuss this pamphlet with your patient, remove this sticker, and put it on the patient's medical history or card. This will remind you and the patient that this pamphlet has been provided. Some doctors ask their patients to sign the sticker to confirm receipt of the pamphlet.

TREATMENT INFORMATION PAMPHLET

PEEL HERE

PROCEDURE: _____

PATIENT'S NAME: _____

DOCTOR'S NAME: _____

EDITION NUMBER: _____ DATE: DD / MM / YYYY