



Leaflet: Dysmenorrhoea (Painful Periods)

Dysmenorrhoea (Painful Periods)

Up to 7 in 10 women have period pains (dysmenorrhoea). The pain is often mild but about 1 in 10 women have pain severe enough to affect their day to day activities.

- ◆ The common type of period pain is called primary dysmenorrhoea. This means there is no underlying disease or condition of the uterus (womb). This is common in teenagers and young women.
- ◆ If period pain is due to a disease of the uterus it is called secondary dysmenorrhoea. This is less common and tends to occur in older women.

Period pain not due to an underlying disease (primary dysmenorrhoea)

What causes the pain?

The cause of the pain is not fully understood. The uterus is normal and the pain causes no damage. Chemicals such as prostaglandins probably play a part. These chemicals build up in the lining of the uterus. They help the uterus to squeeze (contract) and shed the lining of the uterus during a period. It is thought that the uterus may contract too hard in some women. Just like any other muscle, if the uterus contracts too hard it can cause cramp like pains. In some women there may be a build up of slightly too much prostaglandin or the uterus may be extra sensitive to it.

What are the symptoms?

The pain is usually in the lower abdomen. It may spread to the lower back or the top of the legs. The pain usually starts as the bleeding starts but it may start up to a day before bleeding. The pain may last just a few hours but may last two or three days before easing. It may last different lengths of time each month. Other symptoms such as headaches, tiredness, faintness, breast tenderness, feeling sick and diarrhoea occur in many women in addition to pain.

Will I always have period pains?

Period pains usually start soon after periods begin. The worse time tends to be the late teenage years. The severity of the pain often eases as you get older. Some women say that their period pains became much less after having their first baby.

What can I do about painful periods?

- ◆ *Warmth* - a hot water bottle held against the lower abdomen or a warm bath are commonly used to soothe the pain. The pain often does not last long and this may be all that is needed.
- ◆ *Painkillers* - such as aspirin or paracetamol may help if the pain is mild. Ask a pharmacist to advise.
- ◆ *Anti-inflammatory painkillers* - are the usual treatment for period pain if the treatments above are not helping. They work by blocking the effect of the prostaglandin chemicals in the uterus that are thought to cause the pain. They also usually reduce the amount of bleeding. There are a variety of brands and most need a prescription. However, one type (ibuprofen) can be bought at the pharmacy. These medicines ease pain by up to 70%. Some tips include the following.
 - ▲ It is best to take these medicines regularly over the few days of pain rather than 'now and then' if the pain becomes severe.
 - ▲ It is usual to start taking these as soon as the pain begins or as soon as the bleeding begins if this is before the pain. Some doctors advise to start taking the tablets on the day before the period is expected. The idea is that this may prevent the pain building up.
 - ▲ Some people cannot take these medicines. For example, people with duodenal ulcers and some people with asthma. An upset stomach is a side effect that sometimes occurs. However, problems and side effects are uncommon as they are only taken for a few days each month during the period.
- ◆ *The combined oral contraceptive pill ('the pill')* - is usually effective at easing period pain. This is because the

lining of the uterus becomes thin whilst taking 'the pill'. Therefore the amount of prostaglandin is much reduced.

Painful or heavy periods are much less likely whilst taking 'the pill'. This may be a good treatment if contraception is also needed.

- ◆ *Referral to a specialist* - is rarely needed as period pain is usually controlled well by one of the above treatments. Other medicines, special types of Intra-Uterine Contraceptive Device (IUCD) and nerve stimulation treatments have been tried with some success in women who are severely affected and have not been helped by other treatments.

Period pain due to an underlying cause (secondary dysmenorrhoea)

An underlying disease is sometimes the cause of period pain. For example: endometriosis, fibroids or infection of the uterus (pelvic infection). Symptoms tend to start in women several years after their periods first started. There are usually other symptoms too. The following symptoms may indicate an underlying cause.

- ◆ If there is a change in your usual pattern of pain. For example, if your periods become more painful or the pain lasts longer than you are used to.
- ◆ If the pain is severe or prolonged. For example, if pain starts several days before your period begins and lasts all the way through your period.
- ◆ If you have other symptoms such as irregular periods, bleeding in between periods, pains between periods, very heavy periods, vaginal discharge or pain during sex.

See a doctor if these or any other symptoms develop that you are concerned about. The treatment depends on the underlying cause.

Some types of Intra-Uterine Contraceptive Device (IUCD) can make period pains worse in some women. The treatments described above often help. However, some women prefer to have it removed if symptoms do not improve.

[Return to top](#)