



YOUR DOCTOR WILL SEE YOU NOW

PELVIC PAIN

Pelvic pain is typically defined as non-cyclic pelvic pain that has persisted for three to six months or longer and is unrelated to pregnancy. The pain can be episodic or constant. If it occurs cyclic with the menstrual cycle, that would be considered dysmenorrhea.

According to a study by the National Institute of Health, roughly 15 percent of women of childbearing age in the United States experience chronic pelvic pain lasting at least six months. Overall, nearly 1 in 3 women experience some form of ongoing pelvic pain during their lifetime.

CAUSES OF PELVIC PAIN

There are several possible causes ranging from GI, urologic, gynecologic, psychosocial, or musculoskeletal. Sometimes the cause is unknown.

Endometriosis, pelvic support problems, pelvic inflammatory disease (PID), ovarian cysts and fibroids are common causes of pelvic pain.

DIAGNOSIS OF PELVIC PAIN

Because pelvic pain can have many causes, it's often hard to diagnose. You should see your health care provider if you have pain that does not go away. Your doctor will usually start with a thorough history and physical exam with a pelvic exam to delineate the cause of the pain.

They may order a pelvic ultrasound, cultures, or blood work depending on the nature of the pain.

Sometimes non-gynecological specialists such as a gastroenterologist (a physician who focuses on digestive problems like irritable bowel syndrome, inflammatory bowel disease, or diverticulitis) or a urologist (a physician specializing in urinary tract problems like interstitial cystitis or cancer) are consulted.

TREATMENT OF PELVIC PAIN

Treatment is directed toward the cause of the pain. Several pain-relief treatments can be used, including lifestyle changes, medication and pain-relieving drugs, physical therapy, nutrition therapy, and surgery.

- Lifestyle changes include regular exercise, preferably in the sunshine, and good posture to help reduce pelvic pain.

- Medication and pain-relieving drugs like nonsteroidal anti-inflammatory drugs (NSAIDs) are helpful in relieving pelvic pain, especially with dysmenorrhea. Hormones such as birth control pills, Mirena, or birth control implants are helpful in relieving pelvic pain from many causes. Sometimes antibiotics are prescribed.

- Physical therapy may use acupuncture, acupressure, nerve stimulation therapies, and mental techniques such as relaxation exercises and biofeedback to cope with pain.

- Nutrition therapy with Vitamin B1 and magnesium may be used to relieve dysmenorrhea.

- Surgery with laparoscopy to remove cysts and endometriosis tissue, dilatation and curettage (D&C), or minimally invasive hysterectomy may relieve pelvic pain in some situations.

For more information or to schedule an appointment, call 605-718-3747 or visit RapidCityObGyn.com.



Hours:
Monday - Friday | 8AM - 5PM

605.718.3747

236 Jordan Drive, Suite 100A,
Rapid City, SD