

Menstrual Cramps

What are menstrual cramps?

Menstrual cramps are pain or discomfort in the lower belly just before or during a menstrual period. Dysmenorrhea is the medical term for menstrual cramps.

About 10% to 15% of women with menstrual cramps have symptoms that are bad enough to make it hard to do their normal activities.

What is the cause?

Dysmenorrhea can be either primary or secondary.

Primary dysmenorrhea usually starts 1 to 2 years after your first period, but it may start earlier. The cramps happen because of chemicals in the lining of your uterus called prostaglandins. These chemicals make the uterus contract to pass menstrual fluid. Women who have painful periods have more prostaglandins in their menstrual fluid.

Secondary dysmenorrhea is caused by a specific disease or disorder, such as:

- Endometriosis, which is tissue from the lining of the uterus growing outside the uterus
- Pelvic inflammatory disease (PID), which is an infection of the female organs
- Tumors (called fibroids) or cysts in the uterus

Intrauterine devices (IUDs) can also cause cramping pain during menstruation.

What are the symptoms?

You have pain or discomfort in your lower belly. You may also have:

- A dull ache in your lower back
- Headache
- Nausea
- Loose bowel movements or diarrhea
- Discomfort in the inner part or front of the thighs

How is it diagnosed?

First, your healthcare provider will usually ask the following questions:

- When do you have the pain?
- What do you do about the pain?
- Do any nonprescription pain medicines relieve the pain?
- Do you have any other symptoms?
- If you are taking birth control pills, do they relieve the pain or make it worse?
- Is the pain getting worse?
- Do you miss school or work because of cramps?

Your provider will examine you, including a pelvic exam. You may have blood tests. Your provider may look at your uterus and ovaries with an ultrasound scan of your pelvis.

How is it treated?

The first choice for relieving menstrual cramps are nonprescription, nonsteroidal anti-inflammatory drugs (NSAIDs), such as ibuprofen, naproxen, or aspirin. These drugs lower prostaglandin levels in your body. NSAIDs, such as ibuprofen, naproxen, and aspirin, may cause stomach bleeding and other problems. These risks increase with age. Read the label and take as directed. Unless recommended by your healthcare provider, do not take for more than 10 days for any reason. Check with your healthcare provider before you give any medicine that contains aspirin or salicylates to a child or teen. This includes medicines like baby aspirin, some cold medicines, and Pepto-Bismol. Children and teens who take aspirin are at risk for a serious illness called Reye's syndrome.

If you take an anti-inflammatory drug, make sure you take it as soon as you start having any bleeding or cramping. If your periods are regular and you can predict when your period will begin, start taking an anti-inflammatory drug 1 to 2 days before you expect your period. This can often prevent cramping. Taking ibuprofen or naproxen with food or milk may help prevent the stomach upset that is sometimes caused by these drugs.

Nonprescription pain relievers such as acetaminophen may also be helpful. If your symptoms are severe, you may need a stronger prescription anti-inflammatory drug or other medicine. For example, birth control pills or other similar hormone medicines are a possible treatment. Hormone medicine lessens cramping by decreasing prostaglandin production. If birth control pills relieve the pain, you may take them even if you don't need them for birth control.

If the pain is not relieved with medicine, a surgical procedure called laparoscopy may be done to look for problems that may be causing the pain, such as endometriosis.

Secondary dysmenorrhea may be treated in the same way as primary dysmenorrhea, or there may be a specific cause that needs to be treated.

How long will the effects last?

Pain caused by primary dysmenorrhea starts just before or at the start of a period. It usually lasts 1 to 3 days. Pain caused by secondary dysmenorrhea may start several days before your period and last throughout your period.

Menstrual cramps are common during the late teens and early 20s. They often get better after age 25. They are less common if you have gone through childbirth.

Even though the cramps are painful, they will not hurt the uterus or your ability to have children.

How can I take care of myself?

Having your period does not mean that you are sick. In most cases it should not stop you from doing most of the things that you normally do.

Here are some things you can do to treat the pain:

- Take acetaminophen or a nonprescription anti-inflammatory drug, such as ibuprofen, naproxen, or aspirin, to relieve discomfort.
- Put a heating pad set on low, or a covered hot water bottle, on your lower back or belly.
- Soak in a warm (not hot) tub.
- Gently massage your lower belly or lower back.
- Have regular yearly checkups, including a Pap test.

Follow your healthcare provider's instructions. Ask your provider:

- How and when you will hear your test results
- What activities you should avoid and when you can return to your normal activities
- How to take care of yourself at home
- What symptoms or problems you should watch for and what to do if you have them

Make sure you know when you should come back for a checkup.

What can I do to help prevent menstrual cramps?

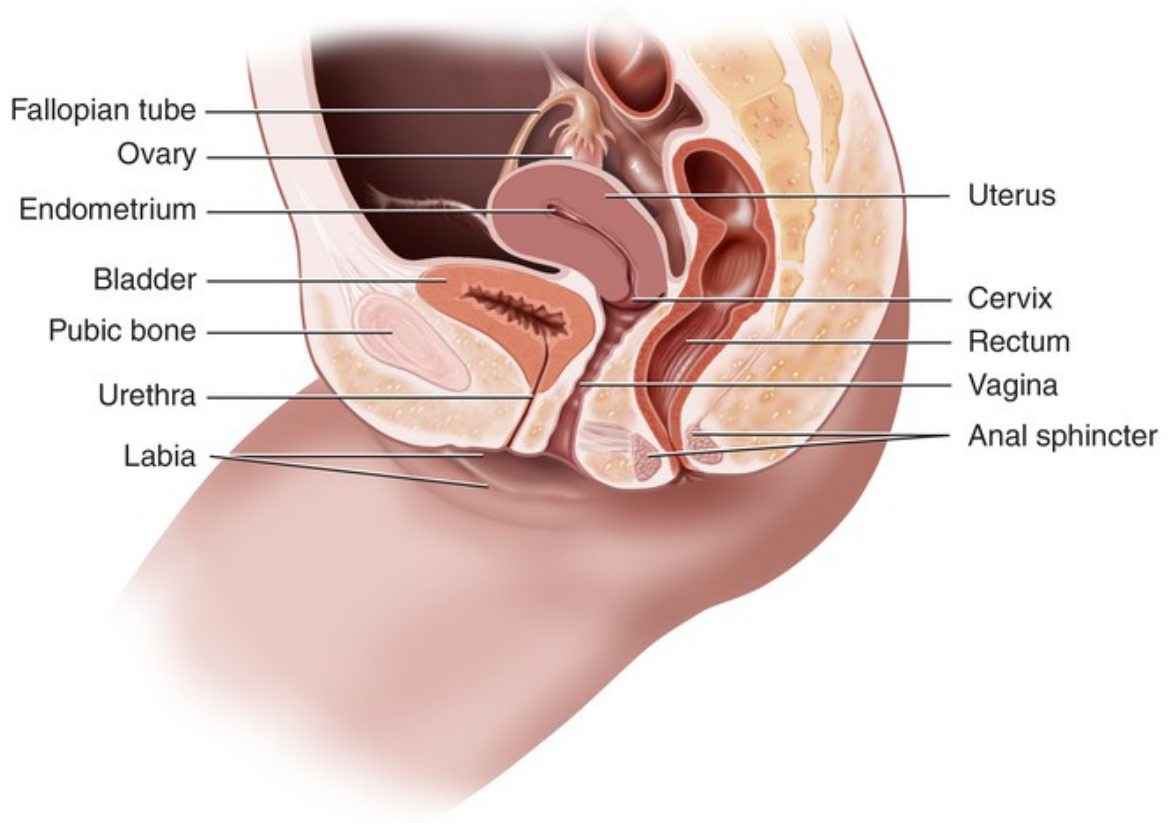
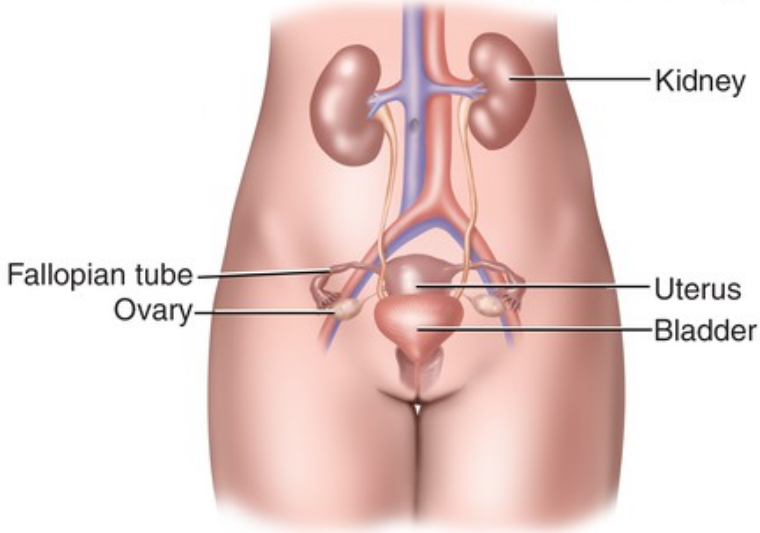
- Get plenty of rest.
- Exercise regularly. Exercise such as walking, swimming, or bicycling may improve blood flow and ease menstrual pain.
- If your periods are regular and predictable, you can try starting ibuprofen or naproxen 1 to 2 days before you think your period will start. Keep taking the medicine through the first 2 to 3 days of your period. This may help prevent cramps.

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Female Pelvis

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