



## **Dysmenorrhea**

### **What is it?**

Dysmenorrhea is the term for painful (dys-) menstrual periods (-menorrhea). An estimated 30-50% of young women experience dysmenorrhea; about 15% have significant disruptions in their daily routine during their menstrual periods.

Primary dysmenorrhea begins within a few years of the onset of menstrual periods. Along with menstrual cramping, a woman may experience low back pain, leg pain, nausea, vomiting, diarrhea, headaches, lightheadedness and fatigue. The severity of cramping and other symptoms can vary from one period to the next.

### **What causes it?**

Primary dysmenorrhea which begins in the teen years is due to increased levels of substances called “prostaglandins” which are produced by the body. It is unknown why some women produce increased levels of prostaglandins or are more sensitive to them.

Secondary dysmenorrhea begins at a later age and may be caused by pelvic inflammatory disease (PID), endometriosis, myomas (uterine fibroids), or other pelvic abnormalities. Other symptoms may include painful intercourse and pelvic pain between menstrual periods. These symptoms, or any new onset of dysmenorrhea beyond the teen years, should be evaluated by a health care provider.

### **How can I prevent/treat it?**

General measures which can help minimize symptoms include:

- Regular exercise
- Minimize caffeine intake
- Vitamin B-complex, calcium, and magnesium supplements daily
- Hot baths, heating pads, hot water bottles
- Raspberry leaf tea
- Orgasm
- Acupuncture
- Biofeedback

Over-the-counter medications for dysmenorrhea are known as non-steroidal anti-inflammatory drugs (NSAIDs). They act as prostaglandin inhibitors. They are most effective if taken as soon as symptoms begin, and usually need to be taken at higher doses than usual.

- Ibuprofen (Motrin IB, Advil, Nuprin) 2-4 tablets every 6 hours, up to 16 tablets per day
- Naproxen sodium (Aleve) 2-3 tablets, 3 times per day, up to 9 tablets per day

### **What if those measures don't help?**

If the above measures are ineffective in controlling your dysmenorrhea, see your health care provider. You may need a pelvic exam to check for other problems. If nothing is found, there are prescription medications that are very effective in controlling dysmenorrhea. These include:

- Oral contraceptives (birth control pills). Whether or not you need protection against pregnancy, the pill can lessen or eliminate cramping and other symptoms.
- Mefenamic acid (Ponstel)
- other prescription strength NSA