Dysmenorrhoea; A Painful Disturbing Symptom in Womens

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1. Introduction

The cramping pain accompanying menstrual flow is known as dysmenorrhea.

A long group of young women suffer from the same, this effect their quality of life and leads to some amount of depression, and every month slight fear also.

During menstruation uterus contracts more strongly, if the uterus contracts vigorously it can press against nearby blood vessels, cutting off the supply of Oxygen to muscle tissue. They feel pain when part of muscle briefly loses its supply Oxygen.

2. Symptoms

It is a common symptom but in some youngster it is little bit unbearable. Cramping of pain in the lower abdomen, low back pain spreading down on legs, nausea, vomiting, diarrhea, fatigue, weakness, fainting, or headache, are the symptoms during dysmenorrhea.

3. Types of Dysmenorrhea

1. Primary Dysmenorrhea

Pain that only occurs with menstruation is known as primary dysmenorrhea. It refers to one that is not associated with any identifiable pelvic pathology. It occurs ovulatory cycle. hence it makes its appearance a few year after menarche in youngster's. it is essentially their on the first day of period and progressively lessens with menstrual flow. It often lessons with the passage of time and child birth. Dysmenorrhea in ovulatory cycle is due to prostaglandins related by progesterone in the endometrium.

Certain risk factors may contribute to the condition including-smoking, stress, anxiety, excess weight, family history, beginning periods at an early age.

2. Secondary Dysmenorrhea

It refers to one associated with presence of organic pelvic pathology, i.e. fibroids, adenomyosis, pelvic inflammatory disease (PID), endometriosis, unilateral dysmenorrhea occurs in a rudimentary horn of a bicornuate uterus. And in some mothers complain more menstrual pain after the insertion of IUD. In so women's who have history of primary dysmenorrhea it exceeds as secondary. There are three clinical varieties based on the nature of pain.

- Spasmodic dysmenorrhea with cramps first 2 days.
- Congestive dysmenorrhea-manifests as increasing pelvic discomfort and pelvic pain a few days before menstruation begin. This type commonly seen in PID cases.
- Membranous dysmenorrhea-is a special group in which the endometrium is shed as a cast at the time of menstruation. The passage of the cast is accomplished by painful uterine cramps.

4. Investigations

- 1. Proper history-about nature of pain, duration of pain, regular cycle, menstrual flow rate.
- 2. Pelvic sonography.
- 3. Diagnostic histro-salpingiogram, or sonosalpigiography in any uterine adhesions.
- 4. Diagnostic hysteroscopy laparoscopy to know the stage of endometriosis.

5. Treatment

Primary Dysmenorrhea

- Proper counseling to cope up the pain.
- Simple NSAID tablets to control pain.
- TEN (trans cutaneous electrical; nerve stimulation) which can taken at home and work place also.
- Gentle exercise.
- Acupuncture or acupressure.
- Proper rest and stress reduction.
- Diversion therapy while pain. (meditation, deep breathing exercise,)
- Unable to control the pain medication are tab –inob metnacin provide relief in 70% cases, watch for side effects also.

Secondary Dysmenorrhea

- Oral contraceptive can be to regulate the menstrual cycle. As per the Dr. advise. tab-antagonists (leuprolide, nafarelin).
- If the conservative line of treatment is not responding then surgical remedy are-
- Excision of polyp or uterine septum.
- Adhesions clearance, myomectomy, draining of chocolate cyst, laser vaporization of islands of endometriosis.
- Laser assisted uterosacrad nerve ablation for spasmodic dysmenorrhea.
- Hysterectomy in the elderly women.

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