

What is dysmenorrhea?

Dysmenorrhea is the medical term for pain experienced during menstruation. There are two types of dysmenorrhea, namely primary and secondary dysmenorrhea.

Primary dysmenorrhea refers to common recurrent menstrual cramps that are not caused by any disease. Pain usually begins 1 or 2 days before, or on the day when menstrual bleeding starts and is felt in the lower abdomen, back or thighs. Pain can range from mild to severe, can typically last for 12 to 72 hours, and can be accompanied by nausea and vomiting, fatigue and even diarrhoea. Common menstrual cramps usually become less painful as a woman ages and may stop entirely once she has given birth.

Secondary dysmenorrhea is pain that is caused by a disorder in the woman's reproductive organs, eg endometriosis (a condition in which the tissue lining the uterus (the endometrium) appears on the outside of the uterus).

Other potential problems are:

Adenomyosis – a condition that develops when the lining of the uterus grows into the muscle of the uterus

Pelvic inflammatory disease – a bacterial infection that starts in the uterus and can spread to other reproductive organs

Cervical stenosis – a narrowing of the opening to the uterus

Fibroids (benign tumours) – growths on the inner wall of the uterus

What causes dysmenorrhea (painful menstrual cramps)?

Menstrual cramps are caused by contractions (tightening) in the uterus (which is a muscle) activated by a chemical called prostaglandin. The uterus, in which a baby grows, contracts strongly throughout a woman's menstrual cycle. If it contracts too strongly, it can press against nearby blood vessels, cutting off the supply of oxygen to the muscle tissue of the uterus. Pain results when part of the muscle briefly loses its supply of oxygen.

What are the symptoms of dysmenorrhea?

Pain in the abdomen, which may be severe at times

Feeling of pressure in the abdomen

Pain in the hips, lower back and inner thighs

How can I tell whether the dysmenorrhea (menstrual pain) I am experiencing is normal?

If you have severe or unusual menstrual cramps or cramps that last for more than three days, or any of the symptoms listed below, you should contact your health care provider.

- Fever over 37.5 degrees
- Vomiting

- Diarrhoea
- Dizziness, fainting or near fainting
- A rash that looks like sunburn

How can I relieve mild dysmenorrhea (pain with mild menstrual cramps)?

To relieve mild menstrual cramps:

- For best relief, take ibuprofen with a meal as soon as bleeding or cramping starts.
- Place a heating pad or hot-water bottle on your lower back or abdomen.
- Rest when needed.
- Avoid intake of caffeine.
- Avoid smoking and drinking alcohol.
- Massage your lower back and abdomen.
- Women who exercise regularly often have less menstrual pain.
- To help prevent cramps, make exercise part of your routine.

If these steps fail to relieve your pain, your health care provider can prescribe medication for you, for example a higher dose of ibuprofen or another anti-inflammatory medication than is available over the counter. Also, oral contraceptives may be prescribed as they have been proven to reduce menstrual pain.

Reference: Well Project and MAYO Clinic (Foundation for Medical Education and Research)

FAQs

1. Which kind of medical practitioner should I consult when I experience painful periods?

Answer: You need to consult a gynaecologist.

2. Are painful periods normal?

Answer: Many women experience some degree of discomfort and pain during their periods. If the pain and cramping is severe enough to disrupt daily activities and is accompanied by nausea, diarrhoea and headaches, you need to consult a gynaecologist.

3. How long do menstrual cramps normally last?

Answer: They usually begin with the onset of periods and generally do not last more than two to three days.

4. Why do I have severe cramping during my periods?

Answer: Your body may be producing more prostaglandins than is normal. Consult a health care provider, who may recommend nonsteroidal anti-inflammatory drugs (NSAIDs), which reduce the number of prostaglandins and provide relief.

5. My mother had painful periods. Will I too suffer from the same condition?

Answer: In this connection one cannot generalise. Although family history increases the risk, you may or may not suffer from the same condition as your mother. You can reduce the risk by exercising regularly, following a healthy diet, avoiding smoking and alcohol intake and practising stress-reducing techniques.

