

**12.5 DYSMENORRHEA**

TITLE	DESCRIPTION
DEFINITION:	Dysmenorrhea is painful menses, usually characterized by cramping and lower abdominal pain. It is further classified as primary or secondary. Primary dysmenorrhea is usually early onset and a result of excessive amounts of prostaglandins released in the endometrium which in turn causes ischemia and cramping. Secondary dysmenorrhea is caused by uterine or pelvic pathology such as endometriosis, pelvic infections, adhesions, cervical stenosis, adenomyosis, fibroids, or neoplasia. It may begin a few days before menses and get worse over time.
SUBJECTIVE:	<p><b>May Include:</b></p> <ol style="list-style-type: none"> <li>1. Complaints of lower abdominal cramping pain that only occurs during or is significantly worse during menses.</li> <li>2. Nausea, vomiting, headache, lightheadedness, low back pain, dysuria, altered bowel habits, bloating, malaise, fatigue, tachycardia, and/or sweating.</li> <li>3. LMP and/or description of bleeding patterns.</li> <li>4. Medical, sexual, contraceptive use history, as appropriate.</li> <li>5. History of pelvic abnormalities, pathology, or surgery.</li> </ol> <p><b>Should Exclude:</b></p> <ol style="list-style-type: none"> <li>1. A new finding of pelvic pathology not previously assessed.</li> </ol>
OBJECTIVE:	<p><b>May Include:</b></p> <ol style="list-style-type: none"> <li>1. Physical and/or pelvic exam.</li> </ol>
LABORATORY:	<p><b>May Include:</b></p> <ol style="list-style-type: none"> <li>1. Vaginitis/cervicitis, STI testing as indicated.</li> <li>2. Hgb.</li> <li>3. Pap smear.</li> </ol>
ASSESSMENT:	Dysmenorrhea, primary or secondary.
PLAN:	<p>Treatment options may include one or more of the following:</p> <ol style="list-style-type: none"> <li>1. Provide nonsteroidal anti-inflammatory medications* such as: <ol style="list-style-type: none"> <li>a. Ibuprofen* 400-800 mg PO q 6-8 hrs po PRN pain (available OTC) OR Naproxen Sodium* 500mg initially followed by 250 mg q 6-8 hrs PO PRN pain (Not to exceed 880mg in 24 hours) OR</li> <li>b. Ketoprofen 25-50 mg q 6-8 hrs PO PRN pain.</li> <li>c. Mefenamic Acid (Ponstel) 500mg initially followed by 250mg q 6 hrs PO PRN pain. Is an RX only, should not be taken for &gt; 3 days in a row.</li> <li>d. Above therapies are most effective if a loading dose is given 1-2 days before onset of menses or first sign of bleeding, and then on a regular schedule for 2-3 days. Advise client of possible adverse GI symptoms with NSAIDS (GI bleed, indigestion, headache and diarrhea). Contraindications in clients with history of ulcers, significant asthma, or hepatic renal failure.</li> </ol> </li> <li>2. Hormonal contraceptive options, including extended OC or vaginal ring use, injectable medroxyprogesterone acetate, to inhibit ovulation and reduce menstrual flow. (Refer to chosen hormonal method protocol.)</li> <li>3. Dysmenorrhea generally improves with the Levonorgestrel Intrauterine System.</li> </ol>

TITLE	DESCRIPTION
	(Refer to protocol.)
EDUCATION:	<ol style="list-style-type: none"> <li>1. Provide client education regarding causes and palliative treatments (e.g. heat therapy, TENS, and exercise – especially aerobic).</li> <li>2. Encourage nicotine cessation.</li> <li>3. Recommend client RTC annually and PRN for problems.</li> </ol>
REFERRAL TO MEDICAL PROVIDER:	Clients with dysmenorrhea not resolved by above treatments.
REFERENCES:	<ol style="list-style-type: none"> <li>1. <i>Hatcher RA, Trussell J, Nelson A, Cates W, Kowal D, Policar M. Contraceptive Technology. 20 edition. Atlanta GA: Ardent Media, Inc., 2015. Pp.552-555</i></li> <li>2. <a href="http://reference.medscape.com/drugs/nsaids">Medscape Reference</a> (<a href="http://reference.medscape.com/drugs/nsaids">http://reference.medscape.com/drugs/nsaids</a>). 2012 (Retrieved 2/8/2017).</li> <li>3. <a href="https://www.acog.org/Patients/FAQS/dysmenorrhea-Painful-Periods">ACOG Dysmenorrhea: Painful Periods</a> (<a href="https://www.acog.org/Patients/FAQS/dysmenorrhea-Painful-Periods">https://www.acog.org/Patients/FAQS/dysmenorrhea-Painful-Periods</a>). (Retrieved 2/8/2017).</li> </ol>