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# Chronic Pelvic Pain

## Information and advice



## Contents page

What is long term pelvic pain? .....	P3
What causes pelvic pain? .....	P5
What types of tests are required? .....	P6

Whatever your situation, you may be offered painkillers. If these do not help to control your pain, you may be referred to a pain management team or a specialist pelvic pain clinic.

***Your doctor may not be able to predict what might happen for you as an individual.***

***For many women the pain gets better with time. Most women have no serious or life-threatening problem underlying the pain. Many women find that they can cope better with their pain after they have been given a thorough explanation of the nature of the pain, including previous test results and possible causes of the pain. They can also cope better when they feel reassured that there is no serious or life-threatening disease present.***

***Please read the information provided at [www.cemig.org.uk](http://www.cemig.org.uk) for more details of the treatments offered at this hospital trust. Or contact Luz Hughes Specialist Nurse Pelvic pain and Endometriosis on 07824 866696.***

For more information on Chronic Pelvic pain, visit the website:  
<https://www.rcog.org.uk/en/patients/patient-leaflets/long-term-pelvic-pain/>

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### Further Information

We endeavour to provide an excellent service at all times, but should you have any concerns please, in the first instance, raise these with the Matron, Senior Nurse or Manager on duty.

If they cannot resolve your concern, please contact our Patient Experience Team on 01932 723553 or email [asp-tr.patient.advice@nhs.net](mailto:asp-tr.patient.advice@nhs.net). If you remain concerned, the team can also advise upon how to make a formal complaint.

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## What types of tests might I be offered?

**Tests do not always involve getting a report from a laboratory. Your own history and the way you describe the pattern of your pain can provide much more valuable information.**

- You may be asked to fill in a pain questionnaire and keep a pain diary.
- You will probably be offered an ultrasound scan.
- You may be offered screening tests for sexually transmitted infections.
- If your pain is related to psychological, bladder or bowel symptoms, your consultant may refer you to a specialist or suggest you see your GP. If you have bowel symptoms, for example, you may be referred to a gastroenterologist who may offer you tests for irritable bowel syndrome (IBS).
- If your pain occurs on a regular basis at a specific time in your menstrual cycle, then you may be offered drugs to suppress your periods for a few months. This may help your doctor in making a diagnosis.
- You may be offered a diagnostic laparoscopy. This is a procedure carried out under general anaesthetic. It involves a small cut in the abdomen to examine your reproductive organs and look for any abnormality, problems or damage.
- If your health professional thinks that your pain is due to a particular cause, you may be offered treatment on a 'try it and see' basis. Such treatment could help you to avoid a diagnostic laparoscopy, which carries small but significant risks.

## What is long-term pelvic pain?

Pelvic pain is any pain you feel in the lower abdomen or pelvis. Healthcare professionals consider pelvic pain to be long-term if:

- you experience it either constantly or intermittently for at least six months
- it happens at times other than when you have your period or sexual intercourse.

Chronic or long-term pelvic pain is very common. Almost one in six women suffers from pelvic pain that has been going on for more than 6 months. Unfortunately, many women will suffer for years before a diagnosis is made.

One reason for this long delay in diagnosis is the fact that pelvic pain can have many different causes. Apart from gynecological conditions it can be caused by bowel related conditions and psychological problems. Often, there is a combination of different factors that contribute to the pain.

The treatment is also complex for the same reason

If a cause for long-term pelvic pain cannot be found, women may have fears that people will say it is 'all in the mind'.

Whether or not a cause for long-term pelvic pain is found, doctors work in partnership with women to discuss a treatment and management plan.

## What could long-term pelvic pain mean for me?

How we experience pain is an individual matter and may depend upon any number of factors. Long-term pain can be very difficult to live with. It may cause you emotional, social and even economic difficulties. You may experience depression, difficulties in sleeping and a disruption to your daily routine.

The reasons for long-term pelvic pain are not always easy to diagnose. It is not always possible to treat. Women may need support in managing and coping with their pain.

Even if no reason can be found for the pain, many women find that the quality of their lives improves when they get a better understanding of what is involved.

The Information in this leaflet is based on the Royal College of Obstetricians and Gynaecologists (RCOG) guideline. The Initial Management of Chronic Pelvic Pain (published by the RCOG in April 2005).

## What causes long-term pelvic pain?

In many cases, your healthcare professional will not be able to identify an underlying problem or give a clear diagnosis and he or she will only be able to assure you that there is no serious medical problem.

Long-term pelvic pain is often caused by a combination of physical, psychological and / or social factors, rather than a single underlying condition.

These factors may include:

- Endometriosis (a condition where cells of the lining of the womb (the endometrium) are found elsewhere in the body, usually in the pelvis)
- Adenomyosis (a condition where the endometrium is in pockets within the muscle wall of the womb)
- Pelvic inflammatory disease (PID) (an infection of the womb, fallopian tubes and / or pelvis)
- Interstitial cystitis (bladder inflammation)
- Musculoskeletal pain (pain in your joints, muscles, ligaments and bones)
- Irritable bowel syndrome (IBS)
- Depression, including postnatal depression
- Previous or on-going traumatic experiences such as sexual abuse in some women
- Adhesions (areas of scarred tissue that may be a result of a previous infection, endometriosis or surgery)
- Trapped or damaged nerves in the pelvic area.

***For some women with long-term pelvic pain none of these factors may be found.***