

DYSMENORRHEA (PAINFUL PERIODS)

- severe painful periods, especially when associated with symptoms such as: abdominal bloating, nausea, vomiting, urinary frequency, dyspareunia (deep pelvic ache after intercourse), dyschezia (deep pelvic ache with bowel movements), mid-cycle spotting, and/or spotting after intercourse lends weight to possible diagnosis of [*endometriosis*](#).

- [Pelvic Congestion Syndrome \(PCS\)](#) is another relatively common often that presents with symptoms very similar to endometriosis, and is a diagnosis that is often missed. Women may also notice abdominal distension, lower leg swelling, varicose veins, labial fullness and/or pain occurring outside of the luteal phase.

PLAN:

MEDICATION:

- Ibuprofen: take 600 mg (with food) at the first twinge of pain, then repeat 600 around the clock every 8 hrs if you still feel a twinge of pain. Max dose is 1800 mg daily. Do not use for more than 3 days in a row.

- If you experience indigestion or abdominal pain, please stop taking ibuprofen and contact me.

ALTERNATIVE OPTION:

Magnesium Glycinate:

- take 400 – 500 mg, start 3 days prior to period and continue 400-500 mg every 8 hours until cycle day 1 or 2.

- would recommend magnesium if you have GI issues.

EDUCATION:

prostaglandin and period pain:

- period pain is thought to be caused by prostaglandin build up. If you take ibuprofen at first twinge of pain, you will prevent the formation and the build-up of prostaglandin. If you wait until the pain is significant, prostaglandin has already built up in the tissues, and the ibuprofen will likely only take the edge off. The goal is to "prevent" the formation of prostaglandin.