



## Pelvic Inflammatory Disease

Pelvic Inflammatory Disease (PID) is an infection that may involve the uterine lining and one or both fallopian tubes, ovaries and often neighboring pelvic organs. Sexually transmitted diseases (STDs), specifically chlamydia and/or gonorrhea, are usually the cause. Other organisms that are normally present in the vagina or cervical tissue may occasionally cause pelvic infections. PID is a serious condition that requires prompt evaluation and treatment. If left untreated, PID may require hospitalization and can be life threatening. Complications of pelvic infections include chronic pelvic pain, infertility (inability or difficulty becoming pregnant), and ectopic or tubal pregnancy.

### Who is at risk of developing PID?

While anyone may develop PID, certain factors increase the risk. These factors include:

- Sexual activity without use of a condom
- Multiple sexual partners
- A sexual partner who reports symptoms of chlamydia or gonorrhea
- Previous pelvic infections

### Symptoms and diagnosis

Symptoms of pelvic infection can be very subtle and mild or can occur with a sudden onset of moderate to severe pain. Low abdominal pain or cramping not associated with a period is often one of the first signs reported by patients. Other symptoms include irregular vaginal spotting and bleeding; vaginal discharge that is yellow, thick or foul smelling; pain with intercourse; fever; back pain and urinary discomfort.

The health care provider will take a thorough gynecologic history, including a description of symptoms, sexual and menstrual history, and contraception used. A pelvic exam will be performed and chlamydia and gonorrhea testing will be done. During the internal pelvic exam, the health care provider will check for tenderness of the pelvic organs. A rectal exam may be performed to evaluate the pelvic area behind the uterus. Blood tests may be performed and a pelvic ultrasound may be requested.

### Treatment

Pelvic infections are treated using antibiotics. An injection of antibiotics may be given, followed by 14 days of oral antibiotics. Occasionally the severity of the infection requires hospitalization and treatment with intravenous medications. Follow-up visits will be scheduled. It is essential that a patient take the medication exactly as prescribed or the infection will not clear completely. It is also essential that she keep all follow-up appointments as recommended by her health care provider. A woman must abstain from sexual intercourse until she has finished all of the medication and follow-up exams are normal. Partners will be referred for STD testing and treatment within 60 days.

### Prevention

Women can decrease the risk of pelvic infection by limiting the number of sexual partners, and by consistently using condoms even when other methods of contraception are being used. The Center for Disease Control recommends that all sexually active teens and young adult women be screened annually for sexually transmitted diseases. Any woman who has had a new sexual partner and those with multiple sexual partners should be screened regularly. If vaginal infection symptoms develop, call for an appointment quickly.

If you are a registered University of Illinois student and you have questions or concerns, or need to make an appointment, please call: **Dial-A-Nurse at 333-2700**

If you are concerned about any difference in your treatment plan and the information in this handout, you are advised to contact your health care provider.

Visit the McKinley Health Center Web site at: <http://www.mckinley.uiuc.edu>