

# When are menstrual cramps just 'cramps' or something else?

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Menstrual cramps ... agggh ... they come monthly, can be painful -- even debilitating -- and can be a signal to consult your physician.

"Cramping with your periods or what physicians call "dysmenorrhea" is a common symptom that women experience. This symptom can be a normal part of your cycle or it can be a sign of something more concerning," says Ronald Hirth, MD, an assistant professor of [obstetrics and gynecology](#) at the University of Cincinnati (UC) College of Medicine.

Almost all of the female population experience menstrual cramps, and when they do, the pain can range from a slight ache to a day on the couch with a heating pad, says Hirth.

Women often tolerate this type of cramping, or cramping that can be controlled with over-the-counter medications such as acetaminophen or anti-inflammatory medicines, but there are other conditions that can mimic menstrual cramps, or make them worse.

For example:

- Fibroid tumors in the uterus can cause pain and heavy bleeding. An ultrasound can usually detect fibroids, which can be as small as a pea or as big as an apple or bigger. These tumors are usually benign and can be treated with medications, or sometimes surgery.

- Endometriosis is a condition whereby uterine tissue moves outside the uterus and attaches elsewhere in the reproductive tract. This can cause heavy cramping during your cycle, sometimes pain during intercourse or infertility.
- Pelvic inflammatory disease is an infection of the reproductive tract. This type of infection is often caused by an untreated sexually transmitted disease (STD) and needs immediate attention.

Some of the warning signs that would lead your physician to diagnosis the above are: heavy bleeding or lack of a menstrual period, severe pain, pain that is present outside of the time of your menstrual cycle, problems getting pregnant, fevers, urinary or gastrointestinal symptoms or a change in discharge.

"Many of the reasons for pain can be treated with medications, such as birth control pills, but others may need a surgical solution," says Hirth.

What's most important, he says, is that you discuss your concerns with your OB-GYN.

"Most of the time you can just tell what is actually causing the pain by what the patient is saying to you or complaining of but sometimes a diagnosis can take some time, so be patient with your provider—but also be firm if your pain is severe."

Provided by University of Cincinnati

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