*Widewaters Gynecology*

Diagnosis & Treatment

**Premenstrual Syndrome**

Premenstrual syndrome (PMS) is a group of symptoms that women commonly experience before their monthly menstrual period, usually going away after the period starts. About 85 percent of women suffer from at least one symptom of PMS during each menstrual cycle, although most cases are fairly mild and may not interfere with a woman's normal activities. Severe cases of PMS may be diagnosed as premenstrual dysphoric disorder (PMDD).

The specific cause of PMS is not known, but it is linked to the hormone changes involved in the menstrual cycle, and can also be affected by stress and emotional problems. While symptoms can vary for each woman, some of the common symptoms of PMS include:

* Breast swelling and tenderness
* Fatigue
* Difficulty sleeping
* Bloating
* Constipation or diarrhea
* Joint or muscle pain
* Acne
* Appetite changes
* Anxiety
* Depression

Women who suspect that they have a severe case of PMS and are seeking medical attention for their condition should monitor symptoms and their severity for a few months to help their doctor accurately diagnose the condition.

There are many treatments currently available for PMS, many of which involve simple life changes. Some of these changes may include calcium supplements, exercising regularly, avoiding salty or sugary foods, managing stress and avoiding smoking.  Over-the-counter medications such as ibuprofen or aspirin are often effective in relieving the symptoms of PMS as well. Prescription medication may be prescribed for severe cases of PMS.

**Infertlity**

The standard definition of infertility is the inability to conceive after 12 months of unprotected sexual intercourse.  But women over 35 may be considered infertile if they have failed to conceive after trying for six month.

There are three conditions that need to be met for conception to be possible: sperm must be present, the fallopian tubes must be open, and ovulation must be able to occur. There are a few standard tests performed to evaluate these three critical factors. These include measurements of the hormones that regulate ovulation and egg quality, imaging tests of the fallopian tubes, and semen analysis.

For about 10-20% of infertile couples, even with a thorough evaluation a cause for infertility can’t be determined is called “unexplained infertility”.  Some couples with unexplained infertility successfully conceive after treatment or even without treatment.

Treatment

For most patients, medical or surgical treatment improves fertility enough for conception to be successful. The three levels of medical treatment are:

1. Clomiphene citrate and intrauterine insemination (IUI). Clomiphene citrate, fertility drug produces one or more mature eggs. One dose of the hormone hCG stimulates the ovaries to release the eggs. Then the male partner’s washed and prepared sperm is injected into the uterus (IUI).
2. Gonadotropins and IUI (superovulation). This is similar to the clomiphene citrate method except gonadotropins stimulate the growth of more follicles and also increase the quality of the eggs, cervical mucus and uterine lining.
3. Assisted reproductive technologies (ART), including IVF.  Fewer than 5% of infertile couples need ART services.

**Menopause**

At a certain time in every woman's life, the ovaries cease production of eggs and the menstrual cycle ends. Menopause usually occurs naturally after the age of 40, with the average woman experiencing it around the age of 51.

Early menopause can occur as a result of disease or damage to the ovaries, from hysterectomy or from a family history of premature menopause.

**Diagnosing Menopause**

Menopause is diagnosed when a menstrual period has been absent for 12 months. However, the entire process takes several years and begins when the ovaries start producing less estrogen. This stage is known as perimenopause and is when symptoms may begin. Most women are aware that this process has begun once symptoms begin to develop, but it is important to see your doctor for a full understanding of what to expect during the menopausal transition.

After more than 12 months have passed since the last period, women are then considered to be in the post-menopause period.

Symptoms of Menopause may vary in type, frequency and severity for each individual patient.

**Common symptoms include:**

* Irregular vaginal bleeding
* Hot flashes
* Insomnia
* Night sweats
* Fatigue
* Depression
* Bladder control symptoms

Not all women experience symptoms of menopause. Those who do may be mild or severe. These symptoms can last from the perimenopause stage and for several years after menopause.

**Treatment for Menopause**

Although menopause is considered a natural process and not a medical condition, there are a number of treatments available to relieve symptoms, which may include lifestyle changes, medications, hormone therapy and more. Some of these treatments may be recommended on a continuing basis to help reduce a patient’s risk of osteoporosis and other post-menopausal complications. Treatments are also available to treat individual symptoms and often provide more immediate relief.

Women can often reduce the symptoms of menopause and feel their best by maintaining an active and healthy lifestyle throughout the process. Your doctor will provide you with a personalized treatment plan to most effectively relieve your symptoms of menopause.

At Widewaters Gynecology, we provide comprehensive care for patients going through menopause and strive to be there every step of the way to provide the information and support you need during this often difficult time.

**Abnormal Pap Smear**

An abnormal Pap smear doesn't necessarily indicate a condition like HPV or cervical cancer.

Pap smears are constructed to detect any changes within the cervical cells, and abnormal results may indicate other conditions such as inflammation, hyperkeratosis, or atypical squamous or glandular cells. False positives are also common from Pap smears, but we take every precaution we can to ensure your health.

Your doctor may perform a colposcopy after abnormal cells are found in order to examine the cervix more closely and take a biopsy of any abnormal tissues.

Any necessary treatment will be performed after further examination.

**Irregular Menses**

Menstrual disorders can turn your monthly period from a minor hassle to a major, debilitating inconvenience. These disorders can cause physical and emotional symptoms and can severely disrupt your daily life.

* Amenorrhea– Amenorrhea is a condition that involves the absence of menstrual periods .Primary amenorrhea involves having no menstrual period by the age of 16, while secondary amenorrhea involves having no period for three to six months. This is not usually a serious condition, but you should still seek medical attention if you do not get a regular menstrual period.
* Oligomenorrhea – involves infrequent menstrual periods that occur at intervals greater than 35 days apart and sometimes only four to nine times each year. It is most common in women with polycystic ovary syndrome. To promote more regular periods, women may be given birth control pills or hormones.
* Premature Ovarian Failure (POF) -Premature ovarian failure involves a loss of ovarian function before the age of 40. While there is no treatment currently available to restore ovarian function, patients can often benefit from estrogen hormone replacement to restore a regular period and reduce the risk of osteoporosisis.
* Uterine Fibroids -Uterine fibroids are tumors that develop within the uterine walls as a result of hormonal and genetic factors, causing heavy bleeding, frequent urination, pain during sex and an enlargement of the lower abdomen. Some women may also experience fertility issues. Medications may be prescribed to relieve pain and stop fibroids from growing, while more severe cases may require surgery.
* Endometriosis –Endometriosis involves a growth of uterine lining cells outside the uterus, causing pain and forming scar tissue. Although the cause is not known, endometriosis can usually be treated through medication such as anti-inflammatory drugs, oral contraceptives or progestins. More severe cases may require surgery, which can include removal or destruction of endometrial implants. A hysterectomy may also be performed.
* Dysmenorrhea –Dysmenorrhea is a menstrual disorder that involves painful cramps with or without an underlying gynecological disorder such as infection, endometriosis or ovarian cysts. Women suffering from this condition can often relieve symptoms with an over-the-counter pain reliever or by using heating pads. Birth control pills may be prescribed for more severe cases to help make periods shorter and lighter.

### Urinary leakage and Prolpase

Pelvic relaxation is the weakening of the pelvic floor muscles and ligaments that often occurs after childbirth.  Other factors such as aging, constipation, chronic cough and obesity may also increase the risk of this condition. This can lead to bladder control problems, urinary tract infections and pressure or bulge in the vaginal area.

Treatment for pelvic relaxation depends on the severity of the condition. Many mild cases can be effectively treated through Kegel exercises, which can be performed at home and aim to strengthen the pelvic floor muscles and restore organs back to their normal position. Estrogen supplements may also be prescribed to treat pelvic relaxation.

More severe cases may require surgery to repair the pelvic floor or remove the entire uterus (through a hysterectomy). Your doctor will determine which treatment is best for you after performing a thorough evaluation of your condition.