

# Pelvic Inflammatory Disease (PID)

Brown Health Services Patient Education Series

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## What is PID?

PID (pelvic inflammatory disease) is inflammation caused by infections ascending from the vagina or cervix to the upper genital tract. This includes the lining of the uterus, the ovaries, the fallopian tubes, the uterine wall and the uterine ligaments that hold these structures in place.

## What causes it?

Most cases of PID are caused by sexually transmitted infections (STIs). The disease can be caused by many different organisms or combinations of organisms, but is frequently caused by gonorrhea and chlamydia. Although Bacterial Vaginosis (BV) is associated with PID, whether the incidence of PID can be reduced by identifying and treating people with vaginas with BV is unclear. If you notice abnormal discharge and a fishy vaginal odor (signs of BV) you should be evaluated at Health Services. PID may also occur following procedures that create an open wound where infectious organisms can more easily enter, such as:

- Biopsy from the lining of the uterus
- D & C (dilation and curettage – a procedure which involves scraping of

the uterine lining to treat abnormal bleeding)

- PID risk from insertion of an IUD (intrauterine device) – occurs in the first 3 weeks post insertion
- Abortion

## Why is it important to treat PID?

- PID is the most common serious infection of women aged 16 to 25 years of age
- Untreated pelvic infections may cause adhesions in the fallopian tubes, which may lead to infertility
- 1 in 4 women with acute PID develop future problems such as ectopic pregnancy or chronic pelvic pain from adhesions

## What are the symptoms?

- Painful intercourse could be the first sign of infection
- Pain and tenderness involving the lower abdomen, cervix, uterus and ovaries
- Fever and chills
- Nausea and/or diarrhea
- Abnormal vaginal bleeding or discharge

Early treatment can usually prevent these problems.

## How is it treated?

If treated early, PID usually resolves. If untreated, the infection may spread to other abdominal organs and can be very serious.

- PID is treated with antibiotics, often using a combination of antibiotics. The antibiotics may be an injection, an oral form, or both.
  - It is **critical** for a patient to complete all of the prescribed medications and to keep all follow-up appointments. Rest and take acetaminophen or ibuprofen for pain relief and fever. Do not have sexual intercourse until your medical provider tells you it is ok.
  - It is also very important that the sexual partner(s) be treated, even if they have no symptoms of infection. Talk to your provider about how best to accomplish this. This assures treatment of any possible infection and prevents the partner from spreading it back or spreading it to another partner.
  - Occasionally, if the infection is severe, hospitalization may be needed to receive antibiotics intravenously or to have a surgical procedure performed.
- If you are allergic to latex condoms there are alternatives available and easily obtained at pharmacies or BWell Health Promotion.
  - Discuss STI prevention methods with your partner ahead of time.
  - Have yearly GYN exams to discuss risks and sexual health. Screening and treating sexually active people for chlamydia reduces their risk for PID.
  - See your medical provider if you have concerns about abdominal pain, abnormal bleeding or discharge, painful sex, fever, chills or any other unusual gynecological symptoms.

## How can PID be prevented?

- PID is usually a result of sexually transmitted infection and is much more common among those who have multiple partners and those who don't use latex/barrier protection.
- Limit number of sexual partners to as few as possible.
- Always use a condom and/or avoid intercourse.