

Decoding Dysmenorrhea: Divergent Perspectives in Pain Management

Authors: Dr Parmis Vafapour¹, Chethana Krishna Rao², Sangavi Satkunarajah², Sabthagi Sivathanan², Jacqueline Hui², Poppy Sullivan², Roda Mohammed², Maryam Chaudhury², Amrit Marway², Freya Goodman², Natalia Olszewska², Emilia Olszewska², Nabihah Rahman², Sineka Sasuni Weeraman², Dr Esther Murray²

Affiliations: 1.Frimley Health NHS Foundation Trust 2.Barts and the London School of Medicine and Dentistry



BACKGROUND

- NICE reports that up to 91% of people who menstruate suffer from dysmenorrhoea and up to 29% will suffer from severe pain (1).
- A 2023 survey by Wellbeing of Women showed that 56% of women reported difficulties in obtaining treatment and support for menstrual issues (2).
- The main managements as suggested by NICE are currently non steroidal anti-inflammatory drugs (NSAIDs) and hormonal contraceptives (1).
- Effective management is key for improving physical and emotional wellbeing and quality of life (3).
- Dysmenorrhea is often under-diagnosed and under-treated in primary care settings (3).

We aim to gain deeper insight into how dysmenorrhoea is managed from both patient and GP perspectives.

METHODS

Study Design: A **mixed methods** approach will be used to gather and analyse data from both groups.

Quantitative Data

Aim: WHAT are patients' and GPs' preferences for dysmenorrhea management.

- An online survey was launched via Microsoft Forms.
- So far, 298 responses have been received from people who menstruate (target: 385).
- 93 responses have been received from GPs (target: 100 - previously 385 but had to change due to lack of engagement)



Qualitative Data

Aim: WHY are these the preferred strategies for patients and GPs, explore experiences in depth.

- Semi-structured interviews have been conducted with 20 patients (target:10) and 5 GPs (target:10)
- Participants were recruited through the surveys by expressing interest in further research



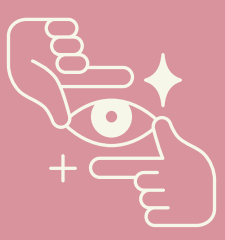
AIMS

- To improve the management of dysmenorrhoea, given its significant impact on quality of life (3).
- To ensure people who menstruate feel empowered to manage period pain effectively.

Approach: Understand dysmenorrhoea management from patient and GP perspectives.

Patient Perspective:

- Explore dysmenorrhoea management preferences.
- Investigate personal experiences of period pain management.
- Examine interactions with healthcare professionals regarding dysmenorrhoea.



GP Perspective:

- Understand the management strategies GPs' consider appropriate for dysmenorrhoea.
- Explore GPs' experiences and how they approach consultations about period pain.



RESULTS

PATIENT FINDINGS

Survey Data

Period Pain Experiences

7.53

Average Pain Rating out of 10

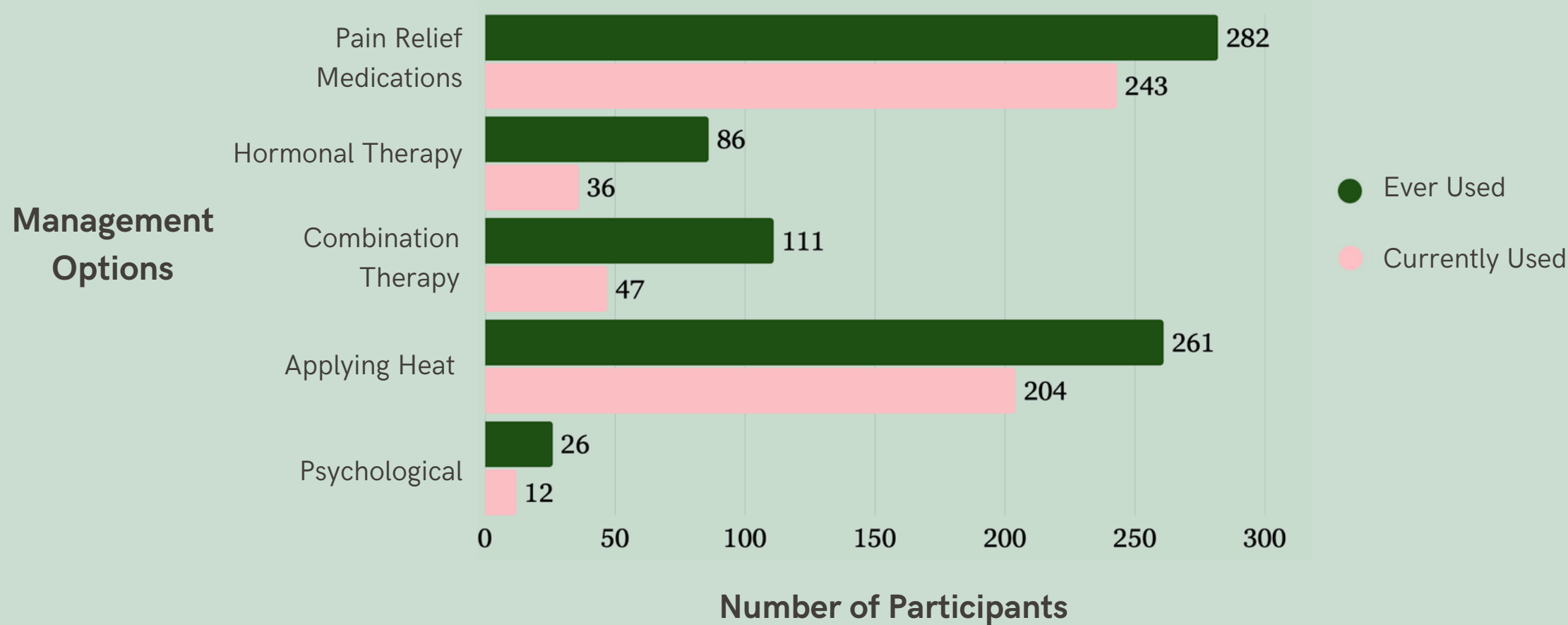
6.81

Average Disruption to Daily Life out of 10

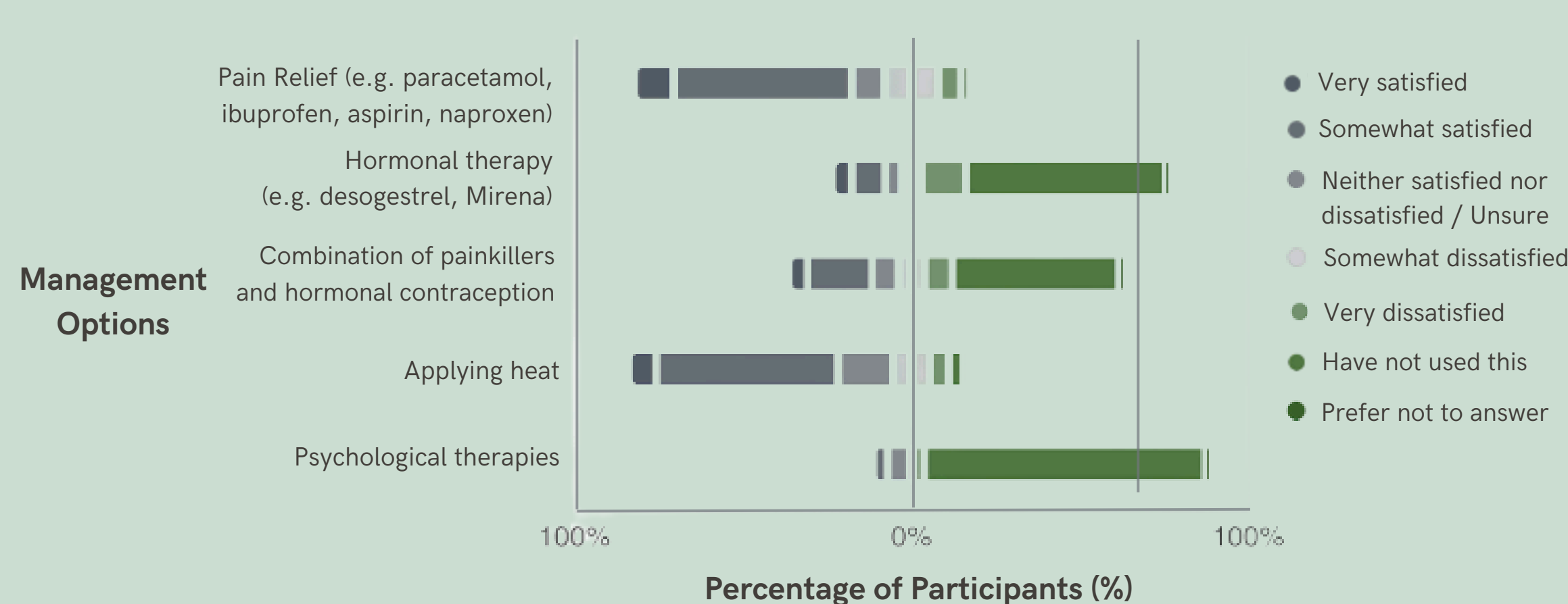
56%

contacted a healthcare professional about their pain

Patient Management: tried and currently used approaches



Patient satisfaction for different management therapies



Interview Themes

Individual Factors

- Leaning on female family/friends
- Uncertainty about hormonal contraception
- Self advocacy
- Not wanting to go to GP/effects of GP experiences
- Feelings on period pain
- Effectiveness of management
- Worries about medicine side effects
- Never sought medical assistance
- Effects of period pain

Healthcare Factors

- Contradictory advice from GPs
- Lack of continuity of care from GPs
- Being dismissed by GPs
- Good GP traits

Treatment-related Factors

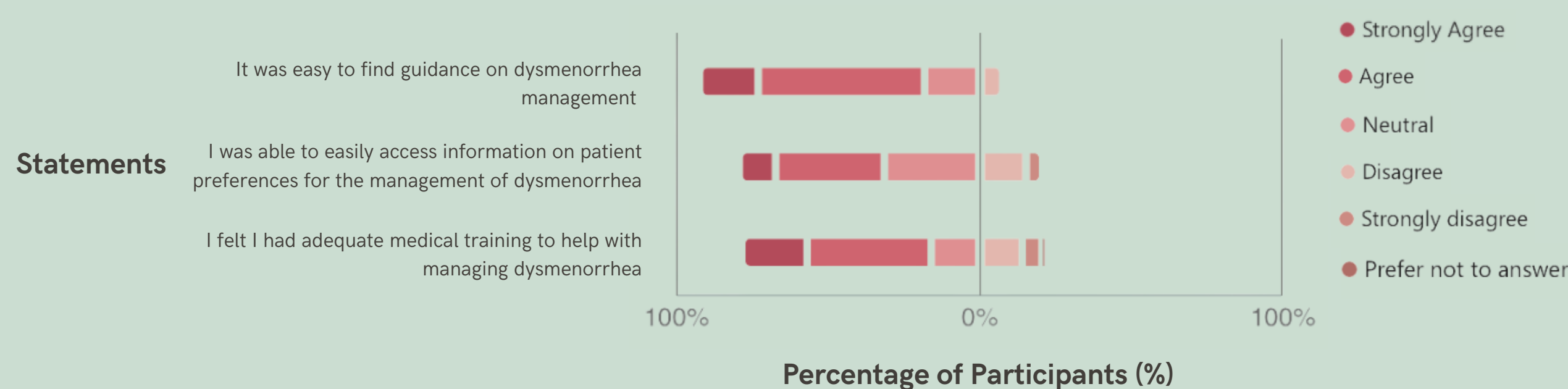
- Use of heat first line
- Second line treatment pain relief
- Homeopathic management
- Limited/restricted options
- Ideal management aims
- Individualised management
- Effectiveness of management
- Worries about medicine side effects



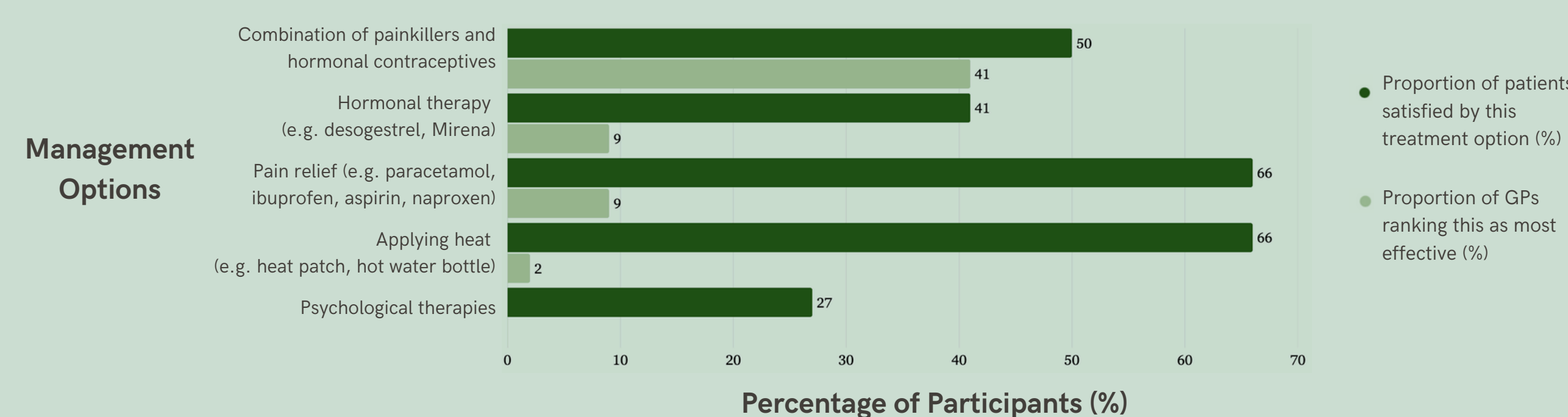
GP FINDINGS

Survey Data

GP Perceptions of dysmenorrhea management training and information



Comparing Management Options: Patient Reported Satisfaction and GP Perceived Effectiveness



Interview Themes



CONCLUSION

Our preliminary findings offer key insights into dysmenorrhea management.

Strikingly, **only 56% of participants with period pain contact a healthcare professional for help**, highlighting a gap in care access. While patients report high satisfaction with pain relief and heat therapies, a notable misalignment exists with GP perceptions as combination therapies were highly ranked by GPs but showed lower participant satisfaction. **Both patients and GPs emphasised the need for individualised treatment**, yet this is often hindered by lack of continuity and contradictory advice.

These findings underscore an **urgent need for improved communication between healthcare providers and patients**, and potentially a re-evaluation of current guidelines to better align with patient needs and satisfaction. Further analysis of our complete dataset will provide a comprehensive understanding to inform future improvements in clinical guidelines and patient care.



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WE WOULD LOVE TO HEAR YOUR THOUGHTS!

If you have experienced or managed period pain and would like to participate in our survey, or you are a GP interested in our project please scan the QR code!

