

Pelvic Inflammatory Disease- Patient information leaflet

Pelvic inflammatory disease (PID) is an inflammation in the pelvis. It is usually caused by an infection spreading from the vagina and cervix (entrance of the uterus) to the uterus (womb), fallopian tubes, ovaries and pelvic area. If severe, the infection may result in an abscess (collection of pus) forming inside the pelvis. This is most commonly a tubo-ovarian abscess (an abscess affecting the tubes and ovaries). PID is common.

What causes pelvic inflammatory disease?

Untreated sexually transmitted infections such as chlamydia and gonorrhoea are the most likely causes of PID.

PID may also be caused by a number of less common infections that may or may not be sexually transmitted.

Occasionally PID can develop after a miscarriage or an abortion.

What are my treatment options?

If you have mild to moderate PID, you will be offered a course of antibiotics. Your doctor or nurse will ask you about any other medicines you are currently taking or you have taken recently. This is especially important if you are taking a contraceptive pill as antibiotics can interfere with its effectiveness. You will usually be given a two-week course of antibiotic tablets. It is very important to complete your course of antibiotic tablets, even if you are feeling better.

Most women who complete their course of antibiotics have no long-term health or fertility problems. When you are in hospital, antibiotics may be given intravenously (directly into the blood-stream through a drip). This treatment is usually continued until 24 hours after your symptoms have improved. After that, you will be given a course of antibiotic tablets.

Should my partner be treated?

If you know that you have developed PID as a result of a sexually transmitted infection, it is important to contact anyone you have had sex with during the last six months. You should suggest that they have screening for chlamydia and gonorrhoea – even if they are well. Your doctor, local genitourinary medicine clinic or sexual health clinic can help you with this, or do it for you anonymously.

When can I have sex again?

You should avoid having sex until you and your partner have completed the course of treatment. If this is not possible, use a condom.

What about follow-up?

If you have a moderate to severe infection, you will usually be given a further follow-up appointment at four to six weeks to check:

- your treatment has been effective
- if a repeat swab test is needed to confirm the infection has been successfully treated – this is particularly important if you have ongoing symptoms
- you have all the information you need about the long-term effects of PID
- you have all the information you need about future contraceptive choices or your plans for pregnancy
- your sexual partner(s) have been screened and treated.

Are there any long-term effects?

Acute PID is an infection that is usually treated successfully. Long-term problems can arise if PID is untreated, if treatment is delayed or if there is a severe infection.

The long-term effects can be:

- scarring of the fallopian tube, which can cause:
 - an increased risk of ectopic pregnancy
 - difficulties in becoming pregnant
- persistent pain in your lower abdomen

Repeated episodes of PID increase the risk of future fertility problems. You can reduce the risk of further infection by using condoms and by making sure that your sexual partner(s) are treated for sexually transmitted infections.

Extracted from the RCOG patient information leaflet- **Acute pelvic inflammatory disease: tests and treatment.**

<http://www.rcog.org.uk/acute-pelvic-inflammatory-disease-tests-treatment>