Pelvic inflammatory disease (PID) - Patient information leaflet

Key points
Pelvic inflammatory disease (PID) is inflammation of the uterus (womb) and/or the fallopian tubes.
It is often caused by sexually transmitted infections (STI)
You can still have PID even if your STI screen is negative.
Treatment is simple
If PID is not treated it can cause serious long term health problems

What is pelvic inflammatory disease (PID)?
❖ PID is inflammation of the uterus (womb) and/or the fallopian tubes.
❖ It is usually caused by a bacterial infection that spreads from the cervix (neck of the womb) up into the uterus and fallopian tubes.
❖ It is caused by a variety of different infections some of which are sexually transmitted and some of which are not.

How do you get PID?
❖ It is more common in young women.
❖ In about one quarter of women it caused by an untreated sexually transmitted infection, especially gonorrhoea or chlamydia that spreads up to the uterus and / or fallopian tubes from the cervix (neck of the womb)
❖ It may develop from a bacterial infection spreading from else where in the body e.g. appendicitis
❖ It may develop after surgery where an instrument has been passed through the cervix into the womb, e.g. after an abortion or fitting an intrauterine device (IUD or coil).

What are the symptoms of PID?
❖ Some women with PID have no symptoms.
❖ Most women have mild symptoms that may include one or more of the following:
  o Pain or discomfort in the lower abdomen
  o Pain inside during sex
  o Bleeding between periods or heavier periods
  o Bleeding after sex
  o A change in the colour or smell or amount of discharge from the vagina
❖ A few women have a more severe infection and may also have a high fever, sickness and vomiting and severe abdominal pain. These women should see a doctor as soon as possible

Do I need any tests?
❖ If you think you have symptoms that could be PID you should visit your family doctor or local sexual health or venereology/dermatology clinic.
❖ PID is diagnosed from a combination of your symptoms, a pelvic examination and testing for STIs. You can still have PID even if your STI screen is negative.
❖ If it is possible you have PID you should be tested for chlamydia, gonorrhoea and mycoplasma and other sexually transmitted infections such as trichomonas, HIV and syphilis, as you may have more than one infection at the same time.

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❖ The doctor or a specialist nurse will take a swab (sample) from the vagina or cervix (neck of the womb) and send it to a laboratory where it will be tested for chlamydia and gonorrhoea.
❖ A pregnancy test should be performed

What is the treatment for PID?

❖ It is important to receive treatment for PID as quickly as possible, as the infection can cause complications and serious health problems if it is left untreated.
❖ The usual treatment is with 2 or 3 different antibiotic tablets taken for 14 days and sometimes an injection
❖ You can take ibuprofen and paracetamol for pain relief
❖ If your symptoms are more severe you may find resting is helpful, and occasionally you may need to be admitted to hospital for treatment.

Should I have sex if I have PID?

❖ You should avoid any sex, even with a condom, until after both you and your partner(s) have finished all your treatment and your symptoms have gone.

What are the possible complications of PID?

If treatment is delayed PID can cause serious health problems.

❖ Pelvic abscess formation
❖ Long term or recurrent pelvic pain in about 1/3 women
❖ Reduced fertility or infertility. This is not usually a problem after the first attack of PID especially if it is treated quickly. The risk increases after each attack of PID
❖ Ectopic pregnancy (this is a serious condition where the baby grows outside the womb).

PID and pregnancy

❖ PID is uncommon in pregnancy but the symptoms are often more severe and it is more likely that you may need to be admitted to hospital

Do I need to tell my partner?

❖ If you do have PID, it is essential that your current sexual partner(s) is (are) tested and offered health advice and screening for gonorrhoea and chlamydia, and treated. Any other sexual partner you have had over the last six months, may be offered testing.
❖ This is to stop you getting the infection again, and also so your partners do not develop complications.

Further help and information

❖ If you suspect that you have PID or any other sexually transmitted infection, then see your family doctor or local sexual health or venereology/dermatology clinic.