

factsheet

PELVIC INFLAMMATORY DISEASE

What is PID?

Pelvic inflammatory disease (PID) is an infection of the uterus (womb), fallopian tubes and ovaries.

If it is not treated early, PID can cause scarring to your fallopian tubes, especially if you get PID again. This can cause subfertility (difficulty in having a baby) or complications in pregnancy including ectopic pregnancy (where pregnancy occurs outside the uterus). Untreated PID can also cause ongoing pelvic pain.

It is important to visit your doctor straight away if you think you have PID.

What causes PID?

PID is usually caused by sexually transmissible infections (STIs), most commonly chlamydia or gonorrhoea. In about 70% of cases the cause of PID is not identified.

How do you get PID?

PID is most often caused by having unprotected sex with a person with an STI such as chlamydia or gonorrhoea. Not all STIs have symptoms. This means you might not know if a person has an STI.

PID can sometimes occur after having a gynaecological procedure (procedure on the parts of female reproductive system). This includes after having an IUD (intrauterine device) put in or after an abortion, as bacteria from the vagina and cervix can enter the uterus during the procedure.

What are the symptoms of PID?

Symptoms of PID can include:

- pain in the lower abdomen
- vaginal bleeding after sex or between periods
- smelly vaginal discharge
- pain during sex
- heavy or more painful periods
- fever or feeling sick (nausea)

How is PID diagnosed?

Your doctor or nurse will ask questions about your symptoms and will perform a pelvic examination (feeling inside the vagina with their gloved fingers) to check for pain or tenderness. The doctor or nurse will look inside the vagina and take swabs to check for infection.

Other tests can include a blood test, a urine test, an ultrasound or, more rarely, a laparoscopy (a special camera which can look inside your abdomen). Treatment usually starts immediately, without waiting for your test results. This is to prevent any serious complications.

How is PID treated?

PID is treated by taking a combination of different antibiotics for at least 14 days. Once you start the antibiotics, you should not have sex for at least a week after treatment or until your symptoms go away.

A follow-up doctor's appointment is important. Even if the tests for infection are negative, you can still have PID. Finishing all the medication given to you by the doctor is very important.

How can I prevent PID?

- always use condoms when you have sex with a new partner
- have regular STI checks if you have had unprotected sex with a new partner
- early treatment of STIs can help to prevent PID

Do my sexual partners need treatment if I have PID?

If you are diagnosed with PID, your current sexual partners should also be treated and screened for STIs. Your doctor or nurse can help you with how to contact your sexual partners. Current sexual partners should be treated for chlamydia even if STI test results are negative. If gonorrhoea or another infection is found, additional antibiotics will be provided.

It is important to not have sex with your partner(s) until they have had treatment, or you may get the infection again.

What happens if I have PID while I have an IUD?

If you are diagnosed with PID and you have an IUD (intrauterine device) it can be left in if your symptoms improve within 48-72 hours after starting the antibiotic treatment. If your symptoms do not improve your doctor will remove the IUD.



For more information

- Visit your nearest Family Planning Australia clinic fpnsw.org.au/clinics
- Chat to a nurse via Talkline – 1300 658 886 or fpnsw.org.au/talkline
- National Relay Service (for people who are d/Deaf, hard of hearing or have speech communication difficulties) – 133 677
- Translating and Interpreting Service (TIS National) – 131 450
- NSW Sexual Health Infolink – www.shil.nsw.gov.au or 1800 451 624
- Contact tracing websites Let Them Know – www.letthemknow.org.au