

Postmenopausal Acute Pelvic Pain

Postmenopausal acute (lasting less than 3 months) pelvic pain is a common cause of emergency department visits and doctor appointments. Although it is more common in women before menopause, about 15% of cases happen in women during perimenopause or after menopause. The pain can come from the pelvis, lower abdomen, vulva, vagina, or perineum (the area between the anus and the vulva). Common causes for this pain include ovarian cysts, uterine fibroids, pelvic infection (pelvic inflammatory disease), and ovarian tumors. Initial imaging tests help narrow down the possible causes of the pain and guide additional imaging tests if required.

For women with postmenopausal acute pelvic pain, initial imaging using CT abdomen and pelvis (<http://www.radiologyinfo.org/abdominect>) with intravenous contrast is usually appropriate. Ultrasound pelvis (<http://www.radiologyinfo.org/pelvis>) transabdominal and ultrasound pelvis transvaginal are also usually appropriate, complementary, and ordered together. MRI (<http://www.radiologyinfo.org/mri-abdomen-pelvis>) without and with contrast, CT abdomen and pelvis without intravenous contrast, and MRI pelvis without contrast may be appropriate.

—By Elaine Liang and Naziya Samreen, MD. This information originally appeared in the *Journal of the American College of Radiology*.

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