Ovulation pain

Summary

- About one in five women experience pain during ovulation that can last from a few minutes to 48 hours.
- Ovulation pain is usually harmless, but can sometimes indicate various medical conditions such as endometriosis.
- See your GP (doctor) if your ovulation pain lasts longer than three days or is associated with other unusual menstrual symptoms, such as heavy bleeding.

Ovulation is a phase of the female menstrual cycle that involves the release of an egg (ovum) from one of the ovaries. For most women, ovulation occurs about once every month until menopause, apart from when they are pregnant or breastfeeding.

About one in five women experience pain and discomfort during ovulation. The duration of the pain varies from one woman to the next, but ranges from a few minutes to 48 hours.

In most cases, ovulation pain doesn’t mean that anything is wrong. However, severe pain may sometimes be symptomatic of gynaecological conditions including endometriosis.

See your doctor if your ovulation pain lasts longer than three days or is associated with other unusual menstrual symptoms, such as heavy bleeding. Ovulation pain is also known as mid-cycle pain and mittelschmerz (German for ‘middle pain’).

Symptoms of ovulation pain

The symptoms of ovulation pain can include:

- pain in the lower abdomen, just inside the hip bone
- pain typically occurring about two weeks before the menstrual period is due
- pain felt on the right or left side, depending on which ovary is releasing an egg
- pain that may switch from one side to the other from one cycle to the next, or remain on one side for a few cycles
- a pain sensation that can vary between individuals – for example, it could feel like uncomfortable pressure, twinges, sharp pains or cramps.
- pain that lasts any length of time from minutes to 48 hours.

Possible causes of ovulation pain

The exact cause of ovulation pain is not clear, but theories include:

- **Emerging follicle** – hormones prompt the ovaries to produce around 20 follicles. Each follicle contains an immature egg (ovum) but only one follicle usually survives to maturity. It is supposed that ovulation pain is caused by the expanding follicle stretching the membrane of the ovary

- **Ruptured follicle** – when the egg is mature, it bursts from the follicle. This may cause slight bleeding. The peritoneum (abdominal lining) could be irritated by the blood or fluids from the ruptured follicle, and this may trigger the pain.

Ovulation pain and underlying medical problems

In most cases, ovulation pain is harmless. However, severe and prolonged ovulation pain, or other pains felt in the lower abdomen, can be symptomatic of various medical conditions including:
• **salpingitis** – inflammation of the fallopian tubes following an infection
• **chronic pelvic inflammatory disease** – inflammation following an infection
• **endometriosis** – the lining of the womb (endometrium) grows in other locations, such as the bowel. Other symptoms include painful periods and painful sex
• **ovarian cyst** – an abnormal pocket of fluid that develops on the ovary
• **ectopic pregnancy** – a pregnancy that develops outside of the womb, most commonly in one of the fallopian tubes. Symptoms include cramping, abdominal pain and vaginal bleeding. Seek urgent medical help
• **appendicitis** – inflammation of the appendix can sometimes be confused with ovulation pain. Seek urgent medical help if the pain is on the right side of your abdomen and you are experiencing nausea and vomiting
• **other gastrointestinal problems** – lower abdominal pain can be symptomatic of a range of gastrointestinal problems, including perforated ulcer, gastroenteritis and inflammatory bowel disease.

**Diagnosis of ovulation pain**

Tests that help determine whether ovulation pain is harmless or caused by infection or disease may include:

- medical history
- physical examination, including an internal pelvic examination
- blood tests
- cervical cultures
- abdominal ultrasound
- vaginal ultrasound
- exploratory surgery (laparoscopy or ‘keyhole’ surgery).

**Ovulation pain – taking care of yourself**

Consult with your doctor to make sure that your ovulation pain isn’t caused by any underlying medical problem. Suggestions on taking care of benign ovulation pain yourself include:

- Try to relax. If the pain is particularly bothersome, rest in bed whenever you can.
- Use pain-relieving medication.
- Apply warmth to your lower abdomen. Use heat packs, hot water bottles or warm baths.
- Take anti-inflammatory medication. See your doctor or pharmacist for recommendations.
- The pill and other forms of hormonal contraceptive can prevent ovulation pain because they stop ovulation. Talk over this option with your doctor.
- See your doctor if you experience ovulation pain that lasts longer than three days, or if you have other symptoms such as heavy bleeding or discharge.

**Ovulation pain and family planning**

Chances of conception are high if a couple have sex in the days before, during and after ovulation. Some women rely on ovulation pain to help them plan a pregnancy.

However, if you’re trying to avoid pregnancy it is unwise to rely on ovulation pain alone. Always use other methods of contraception.

**Where to get help**

- **Your GP**
- Gynaecologist
- Women’s health clinic
- **Family Planning Victoria** Tel. (03) 9257 0100

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