Chronic pelvic pain: ACOG practice bulletin no. 218.

Guideline ID: 1630 Published: 2020 Mar

American College of Obstetricians and Gynecologists (ACOG)

Chronic pelvic pain: ACOG practice bulletin no. 218. Obstet Gynecol. 2020 Mar;135(3):e98-e109. [72 references] PubMed

View Original Guideline

Overview

Guideline Objective

To address the diagnosis and management of chronic pelvic pain

Patient Population

Women experiencing chronic pelvic pain that is not completely explained by identifiable pathology of the gynecologic, urologic, or gastrointestinal organ systems

Recommendations

Recommendation Statements

Major interventions covered in this guideline include:

- Initial evaluation

- Role of pelvic floor, cognitive behavioral, and sex therapies
- Pharmacologic (e.g., neuropathic medications, opioid analgesics), procedural (e.g., trigger point, botulinum toxin injections), and integrative treatment options
- Referral to pain specialist and multidisciplinary care
- Guidance on use of laparoscopic adhesiolysis

Note: Full recommendation statements have not been provided because this guideline does not meet EGT's systematic review of the evidence criteria. Refer to the original guideline for more information.

Evidence Rating Scheme

Refer to the original guideline documentation for more information.

Recommendation Rating Scheme

Refer to the original guideline documentation for more information.

Related Content

Supporting Documents

No supporting documents available.

Implementation Tools

No implementation tools available.

Patient Education

No patient education materials available.

Disclaimer

If you desire to use content from the original clinical practice guideline cited herein, you must contact the guideline developer directly to obtain permission rights.

ECRI's Guideline Profiles are designed to provide information and assist decision-making. Variations in practice will inevitably, and appropriately, occur when clinicians take into account the needs and preferences of individual patients, available resources, and limitations unique to an institution or type of practice. Every healthcare professional using these Guideline Profiles is responsible for evaluating the appropriateness of applying them in a clinical setting.