

by bee.f (bee.f) via cheatography.com/180201/cs/37494/

[illegible]

Female Reproductive Disorders

Pelvic Inflammatory Disease	Endometriosis	Abnormal Uterine Bleeding	Female Infertility
Definition: Infection of the female upper genital tract, including the womb, fallopian tubes & ovaries	Definition: Endometrium (womb lining tissue) implants & grows in places other than the uterine cavity (ovaries, fallopian tubes); women of any age; long term condition	Definition: Bleeding between monthly periods, prolonged bleeding, extremely heavy periods Umbrella term for 2 different conditions (★)	Definition: Couple cannot conceive (both can be the issue)

Female Reproductive Disorders (cont)

Signs & symptoms:	Signs & symptoms:	Signs & symptoms:	Causes:
- May be asymptomatic - Pain around pelvis or lower abdomen - Discomfort or pain during sex that is felt deep inside the pelvis (+/- bleeding) - Bleeding between periods or after sex - Unusual vaginal discharge - Fever & vomiting - Pain in the rectum	- Sharp, deep pain during ovulation, sex, bowel movements, &/or urination - Heavy, painful periods or bleeding in between periods - Indigestion, diarrhoea, constipation, & nausea - Fatigue - Sciatica during menstruation	- Heavy periods - Irregular bleeding - Prolonged periods - Inconsistent menstrual cycles - Spotting	- Infection - Fibroids - Polyps - Septations (congenital malformations) - Polycystic ovaries (produce eggs not ready to be fertilised) - Uterine tube blockage (eggs don't reach uterine cavity) - Adhesions (due to past bleedings)



By **bee.f** (bee.f)
cheatography.com/bee-f/

Published 4th March, 2023.
Last updated 6th March, 2023.
Page 2 of 5.

Sponsored by **ApolloPad.com**
Everyone has a novel in them. Finish Yours!
<https://apollopad.com>

Female Reproductive Disorders (cont)

Pathophysiology & mechanism:	Pathophysiology & mechanism:	Pathophysiology & mechanism:	Pathophysiology & mechanism:
Infection (sexually transmitted bacteria) in the vagina or the neck of the cervix => spreads higher up into the reproductive organs	Retrograde flow endometrial cells => flow through reproductive organs = growth of endometrium tissue occurs in wrong places	<i>Local causes:</i> Polyp, Adenomyosis, Leiomyoma, Malignancy <i>Systemic causes:</i> Coagulopathy, Ovulatory, Endometrial, Iatrogenic, Not otherwise classified (Ishmocele) => Changes in prostaglandin concentration, increased endometrial responsiveness to vasodilating prostaglandins, and changes in endometrial vascular structure	Any of above causes => oocyte not released due to ↓ release of oestrogen by ovaries/↓ follicles available to ovulate/gentic damage/↓ transport of oocyte through fallopian tubes/↓ egg/sperm mobility due to local inflammation/inability of cervix to produce normal mucus, &/or sperm unable to enter the cervix/uterine lining disruption/↓ vascularisation & endometrial regrowth

Female Reproductive Disorders (cont)

Complications:	Complications:	Treatment:	Risk factors:
- Can result in infertility or an ectopic pregnancy - Chronic pelvic pain (⚡) => Especially when asymptomatic as it's left untreated	- Subfertility or infertility - Significant physical, emotional & social impact	Medication, hormonal contraception & surgery	Age; smoking; weight; Hx of STIs (chlamydia & gonorrhea); alcohol
Treatment:	Treatment:	★Menorrhagia:	Treatment:
Antibiotics & in worst cases surgery	Hormone therapy; hormonal contraception; conservative surgery; hysterectomy (last resort)	excessive &/or prolonged menstruation Metrorrhagia: excessive, prolonged &/or irregular bleeding unrelated to menstruation	Fertility drugs

⚡ **Chronic Pelvic Pain:** Any pain in the lower abdomen or pelvis lasting longer than 6 months; common (1/6 women); often without obvious cause (multiple conditions can cause it); physical, psychological & social factors

Urinary Incontinence

Definition:

- Loss of bladder control
- **4** types of incontinence: *Stress* incontinence [Urine leak after coughing, laughing, sneezing, or exercising]; *Urge* incontinence [Urine leak after a strong, sudden urge to urinate]; *Mixed* incontinence [mix of stress & urge, may leak urine with laugh or sneeze]; *Temporary* incontinence [Illness e.g. UTI]

Signs & symptoms:

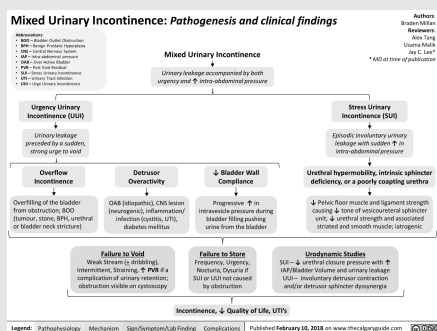
- Failure to void
- Failure to store
- Urodynamic studies

Pathophysiology & mechanism:

- Overflow incontinence => overfilling of the bladder from obstruction; Bladder Outlet Obstruction (tumour, stone, BPH, urethral or bladder neck stricture)
- Detrusor overactivity => overactive bladder (idiopathic), CNS lesion (neurogenic), inflammation/infection (cystitis, UTI), diabetes mellitus
- ↓ bladder wall compliance => progressive ↑ in intravesicle pressure during bladder filling pushing urine from the bladder
- Urethral hyper mobility, intrinsic sphincter deficiency, or a poorly coating urethra => ↓ pelvic floor muscle & ligament strength causing ↓ tone of vesicoureteral sphincter unit; ↓ urethral strength & associated strained & smooth muscle (iatrogenic)

Treatment: Exercises; therapies; medication & surgery

Urinary Incontinence



Urinary Infection

Definition:

- Infection in any part of the urinary system
- Women at greater risk (shorter urethra, increasing likelihood of infection ascension)

Causes: Bacteria (most commonly *faecal bacteria*)

Signs & symptoms:

- Strong urge to urinate that doesn't go away
- Burning feeling when urinating
- Urinating often & small amounts
- Cloudy & strong-smelling urine
- Red, bright pink or cola-coloured urine (signs of blood)
- Pelvic pain (centre of pelvis & around pubic bone)
- Fever &/or chills
- Pain in lower back &/or side

Pathophysiology & mechanism:

1. Colonisation (pathogen colonises the periurethral area & ascends through the urethra upwards to the bladder)
2. Uroepithelium penetration (Cumbria allow bladder epithelial cell attachment & penetration → bacteria continue to replicate & may form biofilms)
3. Ascension (once sufficient bacteria colonise, they may ascend on the ureter towards the kidneys)
4. Pyelonephritis (inflammatory response to the infection of renal parenchyma)
5. Acute kidney injury (if inflammatory cascade continues, tubular obstruction & damage occurs → interstitial edema. may → interstitial nephritis → AKI)

Complications:

- Repeated infections
- Permanent kidney damage (untreated UTI)
- Delivering a low birth weight or premature infant (UTI during pregnancy)
- Narrowed urethra (males)
- Sepsis (life threatening; infection that travelled up to the kidneys)

Treatment: Antibiotic or vaginal oestrogen therapy (after menopause)

by bee.f (bee.f) via cheatography.com/180201/cs/37494/

Sponsored by **ApolloPad.com**
Everyone has a novel in them. Finish
Yours!
<https://apollopad.com>