PEARLS

Practical Evidence About Real Life Situations

Is TENS and effective treatment for primary dysmenorrhoea?

Clinical Question	How safe and effective is transcutaneous electrical nerve stimulation (TENS) for primary dysmenorrhea (PD)?
Bottom Line	High-frequency TENS showed evidence of pain reduction compared to placebo or no treatment. There appeared to be no increase in adverse events though evidence was sparse. Low-frequency TENS may also reduce pain and was not associated with an increase in reported adverse events. No significant difference was found between high- and low-frequency TENS. The effects of high- and low-frequency TENS compared to other treatments remain uncertain, with few trials and no reported adverse events.
Caveat	The majority of the included participants were in their 20's with little evidence found looking at women in their 30'3 and 40's. Overall the evidence was considered to be of low or very low quality with many of the trials not reporting enough methodological detail to enable robust critical appraisal.
Context	PD is characterized by lower abdominal pain during menstruation, affecting 50% to 90% of women, with half experiencing moderate to severe pain. The most common treatment is NSAIDs. TENS is a non-pharmacological alternative for those who can't use drugs due to side effects or contraindications. TENS uses electrodes to deliver electrical currents to the pain site and offers high-frequency (over 50 Hz) and low-frequency (under 10 Hz) options. Mild adverse effects, such as skin irritation can occur.
Cochrane Systematic Review	Han S, Park KS, Lee H, Kim E, Zhu X, Lee JM, Suh HS. Transcutaneous electrical nerve stimulation (TENS) for pain control in women with primary dysmenorrhoea. Cochrane Database of Systematic Reviews 2024, Issue 7. Art. No.: CD013331. DOI: 10.1002/14651858.CD013331.pub2. This review contains 20 trials which included 585 people.

Pearls No. 752, July 2024, written by Assoc Professor Vanessa MB Jordan.

Systematic review link:
https://www.cochranelibrary.com/cdsr/doi/10.1002/14651858.CD013331.pub2/full