

# OSHMed Health Magazine

by



## LOWER ABDOMINAL PAIN: WHAT COULD BE THE CAUSE?

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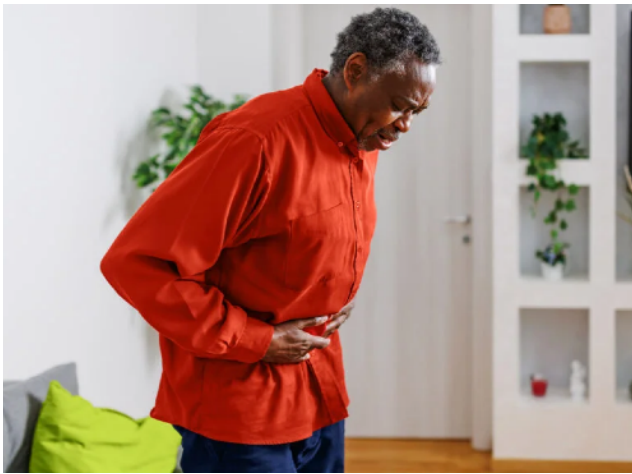


## Lower abdominal pain: What could be the cause?

*Pain or pulling in the abdomen can have many causes. An overview of possible causes and symptoms that require medical advice.*

### In brief

The causes of abdominal pain are varied and often affect an organ that is located in the lower abdomen or pelvis area - such as the intestine, bladder, uterus or ovaries. Common triggers include infections and inflammation in this area. However, vascular and muscle diseases or psychological causes and accompanying factors are also possible.



What can be the cause of abdominal pain?

When we talk about abdominal pain, we usually mean pain in the lower abdomen. It is located below the belly button. However, abdominal pain cannot always be clearly defined and assigned to a location such as the right lower abdomen or attributed to a specific organ from the

outset. Therefore, doctors usually initially refer to the symptoms as abdominal pain in general and not as "intestinal pain".

Abdominal pain can have a variety of causes. An organ in the lower abdomen or pelvis is often affected. This includes the intestine as well as the bladder, uterus, ovaries or prostate. Infections and inflammation in this area are among the common triggers. However, vascular diseases, muscular problems or psychological reasons and accompanying factors can also be the cause.

Occasional abdominal pain affects many people - often there is no serious illness behind it. Below is a selection of possible illnesses that typically cause pain in the lower abdomen or sometimes manifest themselves in this way. A doctor must make the diagnosis.

### When to see a doctor?

Abdominal pain is relatively common and usually goes away on its own. For example, after a mild gastrointestinal infection or if you have eaten something wrong. However, there are also more serious causes and illnesses that need to be treated. The intensity of the pain often depends on the severity of the illness.

In general, there are many possible causes of abdominal pain. Only the doctor can determine what the trigger is.

In some cases, rapid treatment is





necessary.

Therefore, seek medical advice immediately and, if necessary, call the emergency services in the following situations:

- sudden, severe pain
- if the pain gets worse
- if the stomach feels hard and is sensitive to touch or movement.
- If there are signs of blood poisoning such as extreme pain, a feeling of illness like never before, confusion, low blood pressure.
- If there are signs of intestinal obstruction: pain, constipation, vomiting and a bloated stomach are important signs.
- If you can no longer empty your bladder.
- Lower abdominal pain during (possible) pregnancy

If you experience the following symptoms, you should also consult a doctor quickly:

- Pain that persists or recurs and cannot be explained by period pain in women.
- Blood in the stool or urine
- Unusual discharge or bleeding from the vagina
- Persistent stomach or intestinal problems: diarrhea, constipation, nausea, vomiting
- Fever
- Problems with emptying the bladder
- Unwanted weight loss
- How do doctors proceed?
- Even before visiting the doctor's office, it can help to deal with a few questions about the pain. Doctors also use these as a guide to narrow down the causes:
- How severe is the pain: Severe pain can indicate an emergency situation. Therefore, seek medical help immediately.

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- How long has the pain been there: Has it only been painful for a few hours, a few days or perhaps for months?
- Where is the pain: Can the pain be attributed to a specific region - for example, pain in the right lower abdomen. Or is it diffuse and therefore difficult to define.
- How does the pain progress: Does the pain increase or decrease, are there pain-free phases or does the pain persist? Did it start suddenly or did it develop gradually?

To prepare for the conversation with your doctor, it can also help to consider:

- Have there been phases of similar pain in the past?
- Could there be certain triggers, such as certain foods.
- Does the pain change with the menstrual cycle?
- Are there other symptoms - for example, changes in stool, fever, vaginal discharge or problems urinating.
- It is difficult to diagnose a specific illness based on the symptoms alone. Doctors then order further tests depending on the suspected illness.
- For example, they order a blood sample to determine inflammation levels or anemia and examine stool or urine samples for microscopic traces of blood. Imaging, such as ultrasound or computer tomography of the abdomen, can also be important in finding the right diagnosis.

- What problems in the intestines can cause pain?
- Lower abdominal pain often originates in the intestines. The symptoms do not necessarily have to be caused by an illness. Temporary digestive problems such as flatulence, constipation and diarrhea can also cause pain. Pain does not have to be limited to the lower abdomen.



Read here where digestive problems can come from and how they can be treated:

- Constipation
- Diarrhea
- Flatulence

The following intestinal diseases can also cause digestive problems and abdominal pain, for example:

- Appendicitis (often pain in the right lower abdomen)
- Diverticulitis (often pain in the left lower abdomen)
- Infectious intestinal disease
- Irritable bowel syndrome
- Intolerance to food components
- Chronic inflammatory bowel disease
- Intestinal obstruction







- Colon cancer
- Brief description of these intestinal diseases.
- Lower abdominal pain in women and men

In women, abdominal pain often comes from the genitals. However, lower abdominal pain in men can also come from the genitals - for example from the prostate or testicles. Since the prostate is located below the bladder and surrounds the urethra, diseases can also be noticeable through problems when emptying the bladder.

- Diseases of the uterus, fallopian tubes and ovaries
- Pain or a pulling sensation in the abdomen can occur as part of the female cycle: together with the period or between two periods. Mittelschmerz coincides with ovulation - i.e. occurs when you are not having your period. It can be unpleasant, but is harmless.

Abdominal pain can also indicate various diseases of the female reproductive organs, for example:

- Inflammation of the uterus, fallopian tubes and ovaries, for example
- Endometriosis and adenomyosis
- Myomas
- Cysts on the ovaries
- Twisting of the fallopian tube and ectopic pregnancy
- Cancer
- In addition to physical diseases, psychological and social factors can also play a role in chronic lower abdominal pain.
- More about abdominal pain specifically in women.
- Torsion of the testicle
- If a man has sudden lower abdominal pain, possibly combined with nausea and vomiting, doctors also think of a torsion of the testicle, as this must be treated immediately. However, it is one of the less common causes of lower abdominal pain.
- A torsion is also typically indicated by discomfort in the area of the scrotum: sudden onset of moderate to severe pain and swelling. The disease mainly affects children and adolescents, but can also occur in adults.

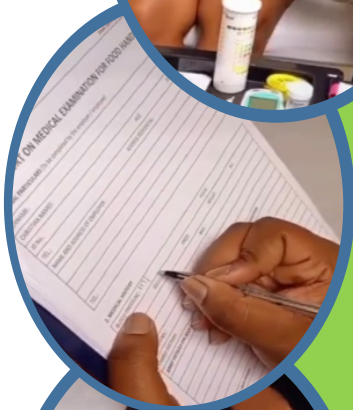




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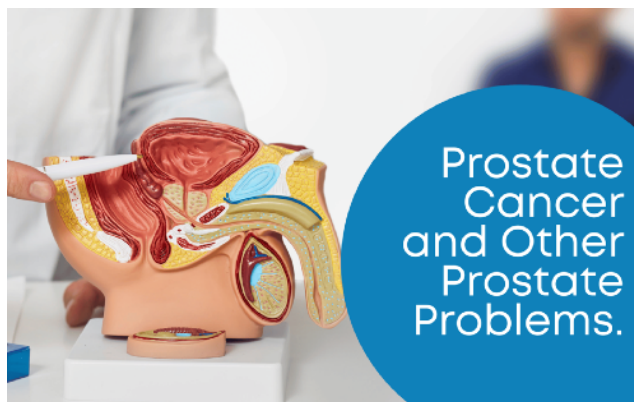


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### Prostatitis - often recurring pain

An inflammation of the prostate can cause lower abdominal pain in men. There are different forms, depending on whether the inflammation is acute or chronic and whether bacteria are involved. Doctors usually prescribe antibiotics for bacterial inflammation.

Acute bacterial prostatitis typically involves a pronounced feeling of illness, fever and various symptoms when emptying the bladder - such as pain, frequent urination or dribbling, cloudy urine - as well as pain in the pelvis or perineum. Pathogens include bacteria that often cause bladder infections, or sexually transmitted chlamydia or gonococci.

Chronic prostatitis occurs when the symptoms last longer than three months or occur repeatedly. Typical for the bacterial form are recurring symptoms that affect the urinary tract, such as pain when urinating or frequent urination, as well as a slight fever. Other pain is also possible - for example in the lower

abdomen, perineum or testicles, as well as during ejaculation.

Chronic pelvic pain syndrome is also known as chronic abacterial prostatitis. Pain is similar to that of the bacterial form. It is also possible to experience problems when emptying the bladder.

What triggers the syndrome and to what extent the prostate is involved is currently unclear. It is much more common than the two bacterial forms and probably affects men between the ages of 40 and 50.

### Abdominal pain with bladder problems

Urinary tract infection - often easy to recognize by the symptoms

Women in particular can easily get a bladder infection due to their short urethra, often caused by bacteria that normally live in the intestines. A bladder

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infection can sometimes manifest itself as pain or pulling in the abdomen. Also typical: you have to go to the toilet particularly often or urgently and experience pain or burning when emptying the bladder, and blood may be visible in the urine.

If other symptoms occur - fever, chills, flank pain or severe tiredness - this suggests that the inflammation has spread further and is also affecting the kidneys. If you experience these symptoms, seek medical advice as soon as possible.

The classic symptoms of a bladder infection do not necessarily have to be present in the case of inflammation of the kidney. In men, pain in the perineum area can also indicate an accompanying prostate inflammation.

To treat urinary tract infections, doctors usually prescribe antibiotics. If the kidney is affected, treatment is sometimes carried out in hospital.

### **Kidney stones - lower abdominal pain on one side**

Difficulty urinating is also possible with kidney stones, but not typical - pain in the left or right lower abdomen, however, is. If kidney stones get from the renal pelvis into the ureter, which transports urine to the bladder, this can be associated with severe pain. They are typically located on the left or right side of the lower abdomen or on the side of

the back in the area between the ribs and hip (flank pain). They can also move towards the groin.



The pain can be mild or severe. A colicky or wave-like course is classic - the intensity of the pain increases and decreases. Many sufferers have blood in their urine, which is not always visible but can be detected during an examination. Nausea and vomiting can also occur. The condition must be assessed by a doctor. They will recommend a suitable treatment depending on the severity of the symptoms and the size of the stones.

### **Acute urinary retention - when urine no longer comes out**

If you can no longer empty your bladder, this is an emergency. Doctors then speak of acute urinary retention. Since the urine cannot drain away, it backs up and stretches the bladder. This can cause discomfort or even severe pain in the lower abdomen. Doctors first drain the urine - for example via a bladder catheter - and then tailor further treatment to the cause.







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Men over 60 who have an enlarged prostate are often affected. Women experience acute urinary retention comparatively rarely. Other factors such as bladder stones, certain medications or infections of the prostate or urethra, for example, or a tumor that presses on the urethra from the outside can also play a role in its development.



### **Other physical and psychological causes Causes in the vessels**

If the intestine is no longer supplied with enough blood, this can also lead to abdominal pain. This can happen, for example, if the vessel is blocked by a clot that has been washed in or - in the case of atherosclerosis - a blood clot forms directly in the vessel.

The severity of the abdominal pain varies. Severe and sudden pain must be clarified immediately, as acute lack of blood flow can cause the affected section of the intestine to die. In a chronic form,

pain can occur over a longer period of time - for example after eating.

### **Hernia in the abdominal wall**

A hernia is a weak point or a rupture in the abdominal wall. The wall consists of a solid layer of muscles and connective tissue and normally holds organs and tissue in the abdominal cavity. However, these can bulge or protrude due to hernias. If a hernia does not cause any symptoms, it can also go unnoticed.

Hernias in the groin area are particularly common in adults. The typical hernia location differs for men and women - in women it is located a little deeper. Those affected can feel a pulling sensation in the groin, a rather dull pain that gets worse when you cough or strain the muscles in the groin area, for example. A bump or swelling of varying sizes in the groin area can also occur. You should have such complaints checked by a doctor and discuss treatment options such as surgery with your doctor.

*Caution:* If organs or tissue are trapped, this can interrupt the blood supply. This complication is an emergency and must be treated immediately in hospital. Severe pain in the hernia can indicate this.

### **Muscular complaints**

You can also feel a pulling sensation in the abdomen when abdominal muscles are overstretched, for example during sport. The oblique abdominal muscles





are particularly affected when you suddenly and forcefully turn your upper body - for example when throwing or playing tennis. Otherwise, a strain of the abdominal muscles is rather rare.

Pain in the muscles can also occur as part of fibromyalgia. Typically, the pain does not only occur in the lower abdomen, but in various parts of the body.

### Neurological causes

Recurrent abdominal pain can also occur as part of a migraine. Those affected usually also have headaches.

In addition, shingles is often accompanied by nerve pain. This can already be present before the rash typical for the disease appears.

### Psychosomatic pain disorders

Persistent pain can also be a sign of a psychosomatic illness. Those affected feel severe and excruciating pain. However, doctors cannot find any physical causes that could adequately explain the pain. However, the pain is related to psychological and social stress.

It is also possible that pain has a physical cause, but psychological factors are also relevant - for example, for the severity of the pain. Psychological stress can also contribute to the persistence of pain.

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## **Health Series - Childhood illnesses:**

### **Hemangiomas in babies**

*About five percent of babies develop a hemangioma after birth. If necessary, it can usually be treated well.*

If parents discover that a light or reddish spot on their baby's skin is developing into a larger, thicker growth, this can be worrying. The good news: a hemangioma is usually harmless.



#### **What are hemangiomas?**

"Hemangiomas are benign tumors that originate from the vessel wall and can form anywhere on the body - they often grow on the face, neck, scalp or extremities, very rarely on internal organs," explains Dr. Julia Kössler-Ebs, an assistant doctor for pediatric surgery and who runs the hemangioma consultation at Heidelberg University Hospital.

"They typically grow for six to nine months, followed by a transition phase in which nothing happens, then they shrink again." By the time the child starts school, there is often nothing left to see.

#### **Pediatrician check-ups are often sufficient**

Three to five percent of infants develop a hemangioma in the first few weeks of life, and babies born prematurely are even more likely to develop one. Girls get them three to five times more often than boys. Why they form is not yet fully understood. It is also difficult to predict how such a spot will develop in individual cases. "It is usually sufficient to have it checked by a pediatrician," explains Kössler-Ebs. "If one or more hemangiomas grow very quickly and in critical places, a child is in good hands in a special clinic consultation."

#### **Sometimes early treatment is necessary**

For ten to 15 percent of affected babies, early treatment is necessary to prevent complications. "If an infant hemangioma grows unchecked on the eye, for example, it can lead to visual impairment and even blindness," says Prof. Dr. Henning Hamm, senior physician at the dermatology clinic at Würzburg University Hospital. He also advises rapid intervention if a hemangioma grows on the lip and prevents the baby from drinking from the breast or bottle. On and in the nose, it can make breathing difficult and cause deformation. If it develops in places where it is exposed to constant friction, it could burst. "Contrary to the fears of many parents, the bleeding is not a major problem," says Hamm. However, it can develop into an





ulcer that hurts and becomes inflamed.

### **A medication can help**

To prevent this from happening, the active ingredient propranolol has been the drug of choice for babies with problematic hemangiomas for several years - a beta blocker that is actually used to treat cardiac arrhythmias. "The fact that it helps was a chance discovery," says Hamm. "French doctors treated children with cardiovascular complications caused by hemangiomas with it and observed that the vascular tumors regressed." Large studies have now confirmed the drug's good effect and tolerability. "It is important to rule out heart problems and to increase the dose slowly and under observation," explains the dermatologist. Since only mild side effects such as nighttime restlessness were observed, other therapies such as lasers, steroids or operations hardly play a role in initial treatment today.

### **When is surgery performed?**

"Surgery is more likely to be considered for children before they start school who have annoying residues left behind - or if a part of the scalp remains hairless," says Kössler-Ebs. The growth of small, flat hemangiomas on the torso, arms or legs can be stopped using a cold pen under local anesthesia.

However, in 85 to 90 percent of children, it is enough to keep an eye on the hemangioma, experts agree. An

uncomplicated hemangioma does not need any extra care. The only important thing is sun protection. But this applies to all baby skin, not just hemangiomas.

### **Infant hemangiomas of the skin**

Normal state: A network of blood vessels runs through the dermis and subcutaneous tissue and supplies it with oxygen and nutrients.

- Cutaneous hemangiomas occur when new blood vessels form and proliferate in the upper layer of the skin. The result: red, raised lumps.
- Subcutaneous hemangiomas consist of proliferating blood vessels under the skin. They usually shimmer bluish through to the upper layer of the skin.
- Mixed hemangioma: In this form of benign new blood vessel formation, the hemangioma spreads both in and under the skin.

### **Important note:**

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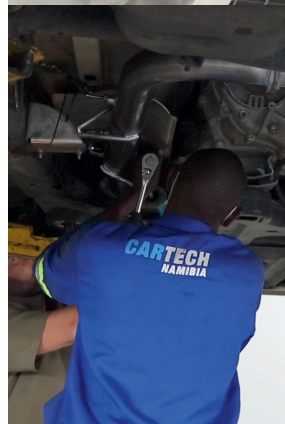
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## The Rise of Technology to Enhance Workplace Safety in Construction

*A range of promising technologies ranging from wearable technology to helmet-based safety measures are now being introduced to boost construction worker safety.*



Construction consistently ranks as one of the most dangerous industries for workers. Over time, the threats that individuals in the industry face have held constant with slips, trips and falls accounting for a majority of workplace accidents. In the United States alone, this line of work sees the highest number of fatal and non-fatal workplace-related traumatic brain injuries (TBIs) out of any other industry. Today, promising technologies are being introduced with the intent of bolstering construction worker safety, ranging from wearable technology to helmet-based safety measures.

Currently, the Occupational Safety and Health Administration (OSHA) requires construction workers to wear personal protective equipment (PPE), and workers at risk of head injury from impact, falling or flying objects, or electrical shock and burns must be equipped with protective helmets.

Novel technologies build upon existing safety mandates and are informed by the real-world experiences and dangers that workers face on the job. While OSHA does have measures in place to ensure workers are wearing appropriate PPE — including a recent transition for their own employees from hard hats to safety helmets — there aren't currently regulations around incorporating new technologies into protective gear.

This tasks employers and safety managers with keeping informed on the latest technologies, and how they can enhance safety on their job sites. Many in the construction industry recognize and embrace the value of using technology for risk management. A culture of safety and a culture of quality go hand in hand: When builders apply the same proactive and concentrated efforts on both quality and safety, it raises the level of performance for both.

### **Wearable Technology**

While a mainstay for many consumers, wearable technology has yet to see widespread adoption in the workplace. For those who face the risk of injuries





## Personal Protective Equipment



throughout the work day, wearable technology can sound the alarm if workers are injured or, better yet, before an accident occurs. For example, safety vests can be equipped with sensors that monitor workers' physiological conditions including blood pressure, body temperature or pulse rate, all of which can indicate health issues. Additionally, GPS technology in so-called "smart vests" can actively monitor a worker's location and alert them if they enter a danger zone on a job site.

Wearable technology can also extend to safety helmets: For example, sensor bands can be installed in helmets to detect workers' health factors, including falling asleep or fatigue, as well as if objects are too close to the worker.

### Rotational Motion Mitigation

Another important helmet upgrade is a rotational motion mitigation system.

Rotational motion can occur when a person's head experiences an oblique impact and consists of a combination of angular acceleration (forces) and angular velocity (energy). The transfer of this rotation to the brain can result in shearing and damage to the brain's axons, the cable transmitters of the neuron. The brain is typically more sensitive to rotational motion than linear motion caused by any impact scenario. Rotational motion can cause concussions or other more severe traumatic brain injuries (TBIs). The construction industry experiences the highest number of fatal and non-fatal workplace-related TBIs, representing a whopping 24 percent of all workplace-related TBI fatalities across industries.

Research indicates that when most people fall to the ground or are struck by a falling object, it typically occurs at an angle. However, safety systems are in





## HEALTH & SAFETY IN THE WORKPLACE



place that are designed to reduce the harmful forces of rotational motion that might otherwise be transferred to the user's head.

Given the proliferation of digital innovations, the number of advancements in safety technology will only continue to grow. It is up to employers and safety managers to remain up-to-speed on the latest improvements to provide a safe environment for workers. The risks that workers face have changed very little over the years, but the tools and technology coming to the fore can reduce the danger they pose to workers. Ultimately, the firms that can leverage technology will be the ones best positioned to safely keep up with the pace and complexity of today's built environment.

For More OSH and Environmental Services contact OSH-Med international,

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## Fun Time - *Joke of the week*



**What kind of water  
doesn't freeze?**

Hot Water.





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# Emergency Call



Important information to give:

- **Where** is the emergency?
- **What** happened?
- **What** kind of injuries?
- **How many** injured person
- **Waiting** for further question

## Emergency Numbers:

### *Ambulance services:*

**E.M.A. Rescue Service**

**9112**

### *Fire Brigade:*

Windhoek

061-21 1111

### *Police:*

NamPol

10 111

City Police (Whk)

061-302 302

MVA Fund

9682

(all numbers are from GRN or non-profit organisations)



d.o.c.  
**Service Hotline**  
**085 - 9112**

OSH-Med International and Emergency & Medical Assistance Service Hotline: 061 – 302 931



**Emergency Call: 9 1 1 2**