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Incidence of four syndromes of pregnancy-related pelvic joint pain.

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STUDY DESIGN: A prospective epidemiologic cohort study.
OBJECTIVE: To determine the incidence of clearly defined pelvic joint pain in pregnancy based on both history and objective confirmation and to classify pelvic joint pain into four groups and determine their incidence.
SUMMARY AND BACKGROUND DATA: Pelvic and low back pain in pregnancy is a substantial problem, and the correct treatment is hampered by several factors, such as the lack of clearly defined clinical conditions, variety of nomenclature, and great variance in reported incidence (range 4-76.4%). This variation in incidence is a problem that calls for a clearly defined criteria and a study design aimed at resolving such varying incidence rates.
METHODS: All pregnant women booked for delivery at two Danish hospitals over a 1-year period were offered to participate in the study in week 33 of gestation. Women who reported daily pain from pelvic joints, which could be objectively confirmed, were divided, according to symptoms, into five subgroups: four classification groups (pelvic girdle syndrome, symphysiolysis, one-sided sacroiliac syndrome, and double-sided sacroiliac syndrome) and one miscellaneous.
A total of 1460 women formed the incidence cohort based on geographic criteria.
RESULTS: A total of 293 women (20.1%) were found to have pelvic joint pain divided in one of the four classification groups: pelvic girdle syndrome 6.0%, symphysiolysis 2.3%, one-sided sacroiliac syndrome 5.5%, and double-sided sacroiliac syndrome 6.3%.
CONCLUSION: This study proposes new, more precise procedures for the identification and classification of pregnancy-related pelvic joint pain based on both reports from the women and a physical examination. Presumably, the 20.1% incidence rate, identified in the present study, represents the most precise and reliable information available hitherto, regarding the incidence of pregnancy-related pelvic joint pain.

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