International Reproductive Health Education Collaboration

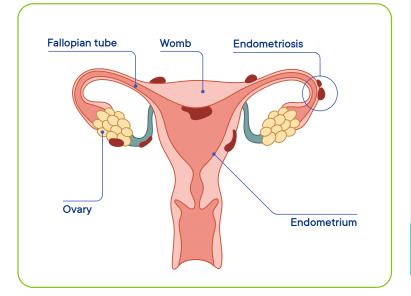


What is it?

Endometriosis is a medical condition that occurs when the tissues lining the womb (endometrium) are found outside of the womb on surfaces or on the inside of other organs. Most commonly, the tissue is found on the Fallopian tubes, ovaries and lining of the pelvis including the bowel and bladder. When the woman has her period, these deposits of tissue may bleed and cause an inflammatory reaction, which may cause pain. If endometriosis has been present for a long time, it can lead to the formation of scar tissue, which can cause long-term pain.

What causes it?

The cause of endometriosis is not fully understood. What happens is that during a period, cells from the womb may travel through the Fallopian tubes and implant on surfaces within the abdomen or other organs in the body. It may also be due to cells from the womb forming in the wrong place when the female baby is developing in the womb. There could also be a problem with the immune system that allows these cells to grow outside the womb. Additionally, endometriosis often runs in families, indicating that genetics may play a role in whether someone might develop this condition.



It is estimated that endometriosis affects about 1 in 10 women.



Endometriosis is also linked to infertility, and about

30-50%

with endometriosis are infertile.

Symptoms



Painful and/or heavy periods that do not respond to simple pain killers



Pain in your lower tummy or back, often related to the menstrual cycle



Pain going to the toilet during your period



Feeling sick during your period



Difficulty becoming pregnant



Deep pain during sexual intercourse



Lack of energy

These symptoms can affect a woman's physical, sexual, psychological, and social wellbeing.

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Diagnosis

If you have any of these symptoms and they are affecting your daily activities, you should go and see your doctor. A diagnosis of endometriosis can be difficult, because the symptoms can vary so much and be very similar to symptoms of other conditions. The National Institute for Health and Care Excellence (NICE) provides national guidance and advice to improve health and social care and they say that endometriosis may be suspected if a woman reports one or more of the following symptoms:

- → Chronic pelvic pain
- → Period related pain affecting daily activities and quality of life
- → Deep pain during or after sex
- → Period related gastrointestinal symptoms
- → Painful bowel movements
- → Period-related urinary symptoms, in particular blood in the urine or pain during urination
- → Infertility associated with one or more of these symptoms

The doctor may conduct an abdominal examination to identify abdominal masses and pelvic signs of endometriosis. An ultrasound and Magnetic Resonance Imaging (MRI) can be done but sometimes the way to diagnose endometriosis is by laparoscopy (keyhole surgery) in which a small camera is inserted through the navel, giving a magnified view of the inside of the abdomen and pelvis. This requires a general anaesthetic.

Treatment

There are several treatment options.

- → Endometriosis can be treated with hormones which inhibit the menstrual cycle such as the contraceptive pill, contraceptive implant or injection and the hormonal coil.
- → Endometriosis can be treated surgically by destroying or removing the affected areas. Sometimes, the endometriosis is so extensive that the patient may be referred to a specialist endometriosis treatment centre for further surgery. Removing the womb and ovaries can be effective but is a last resort.
- \rightarrow For women with long-term pain, referral to a pain clinic can be helpful.

Which treatment is used depends on whether the patient wishes to relieve the pain, remove the endometriosis tissue, get pregnant or reduce recurrence. Age is an important factor; after the menopause, for example, the symptoms of endometriosis will stop in most cases, but may return in women taking HRT (hormone replacement therapy).

Sometimes the pain becomes less during and after pregnancy and may disappear without treatment. Some women find exercise, cutting out certain foods such as dairy and wheat, and psychological therapies and counselling may help. There is limited evidence for the use of complementary therapies such as: reflexology; acupuncture; chinese medicine; herbal treatments; homeopathy; vitamin B1; magnesium supplements; and transcutaneous electrical nerve stimulation (TENS).

ightarrow Women with endometriosis may find it difficult to become pregnant. Surgery or assisted reproduction techniques (like in vitro fertilisation - IVF) may help.

Further reading

https://www.endometriosis-uk.org/

https://www.womenshealth.gov/a-z-topics/endometriosis

https://www.who.int/news-room/fact-sheets/detail/endometriosis

