

Endometriosis Surgery Patient Information

What is endometriosis?

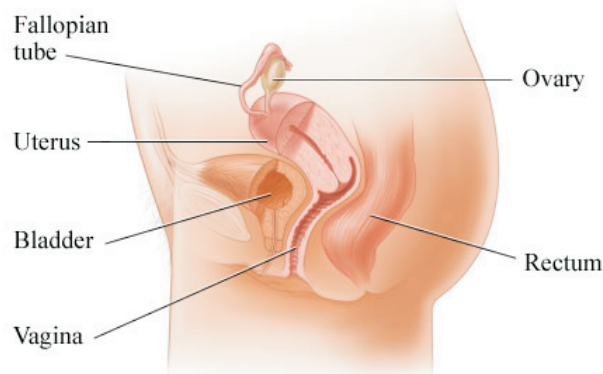
The tissue that lines the uterus (womb) is called the endometrium (or endometrial tissue). Endometriosis is a condition where endometrial tissue is found outside of the uterus, mainly within the pelvis, such as the ovaries or tissues (ligaments) supporting the uterus but also less commonly the appendix, bowel, or bladder. While the exact cause of endometriosis is uncertain, a number of theories exist. It is likely that a number of factors contribute to the formation of endometriosis, including genetic or familial predisposition, environmental and immunological factors, reversal of menstrual flow and changes in the lining of the pelvic cavity.

How common is endometriosis?

Endometriosis affects up to 1 in 4 women of reproductive age.

What does endometriosis do?

Like the endometrium inside the uterus, the endometriotic implants swell and react to the monthly hormonal cycle. The body responds by surrounding the affected area with scar tissue. The formation of scar tissue (adhesions) can result in damage to pelvic structures and may cause these to stick together, unable to move freely. Over time, the endometrial tissue may also enlarge and form cysts, particularly in the ovaries. These cysts are often referred to as 'chocolate cysts' because they are filled with old blood which is chocolate-like in appearance.



What are the symptoms?

The symptoms of endometriosis are variable and do not always correspond to the severity of disease. You could have severe endometriosis and not have many symptoms. However, symptoms may include:

1. Pain: with periods, ovulation, intercourse, when passing urine or opening bowels or continuous pelvic or lower back pain
2. Difficulty falling pregnant (infertility)
3. Cyclical symptoms such as bowel or bladder problems

How is endometriosis diagnosed?

At present time there is no simple screening test (such as a blood test) for endometriosis and the only diagnosis is by laparoscopy (a telescope is passed through a small incision at the umbilicus to visualise the internal organs) and obtaining a tissue sample (a biopsy). This is usually a day surgery procedure under a general anaesthetic and any endometriosis may be treated at the same time.

What are the treatment options?

Endometriosis may be treated by:

1. surgery
surgical treatment of endometriosis has been shown to reduce pain and improve fertility. In general, this surgery is conservative.
2. drug therapy
drug treatment has been shown to reduce pain and may have a role in managing disease in conjunction with surgery. Drug treatment has not been shown to improve fertility. A number of drugs may be used:
non steroidal
danazol
progestins
combined oral contraceptive pill
GnRH analogs

3. complementary therapy

Many women find natural and complementary therapies helpful in the treatment of endometriosis. They can relieve the symptoms and may also assist the body to recover from drug or surgical treatments. Some women also find that natural and alternative therapies provide them with a sense of control. There are a vast number of therapies available but those used most commonly in the treatment of endometriosis

involve dietary changes, exercise, herbal medicine, Traditional Chinese Medicine (TCM), aromatherapy, homeopathy, massage and yoga. Women interested in using complementary therapies should consult a qualified practitioner who can properly advise them on a course of treatment. It is also important that women disclose their use of any complementary therapies to our unit, particularly if they are also undergoing medical treatment for endometriosis.

How effective is treatment?

Despite effective therapy, there is no cure for endometriosis. Regardless of the type of treatment, it is estimated that 1 in 5 women will have recurrence of symptoms within five years. Treatment options are similar to what has been discussed above.

Further Information

<http://www.endometriosis.org.au>

Cooke, K and Trickey, R (2002) *Endometriosis*. Allen & Unwin, Sydney.

Evans, S (2005) *Endometriosis and Other Pelvic Pain*. Lothian Books, Sydney.