

What are the treatments?

There is no absolute cure for endometriosis, but there are a range of treatments that can ease symptoms. Treatment options depend on the desired outcome for the woman, whether the priority is pain reduction, improved quality of life, or pregnancy.



Pain Management

Painkillers, NSAIDs and Pelvic Physiotherapy are used to manage pain. Your GP can help and refer you to a pain clinic if necessary.



Hormonal Treatments

Often used as a first line treatment. Medications such as the contraceptive pill or other hormonal based medications can help reduce symptoms. These medications do not remove the endometriosis deposits and are not recommended in women hoping to conceive in the short term.



Surgery

Surgery, normally done via a laparoscopy is used to excise (cut out) endometriosis deposits, eliminate endometriomas and to divide adhesions. If a woman has extensive disease, bowel and bladder specialist surgeons should be called upon to assist in removing the disease from the affected organs. Surgical treatment should remove all of the endometriosis present. Leaving endometriosis behind results in persistence of symptoms. Techniques that simply "burn off" surface endometriosis often leave a significant amount of endometriosis behind, resulting in a return of symptoms and repeated surgeries.



Hysterectomy and Removal of the Ovaries

Removing the uterus (hysterectomy) and / or ovaries does not treat endometriosis.

In some individual cases where the uterus is considered a source of pain, women are recommended to have their uterus removed. Conditions such as adenomyosis, menorrhagia (heavy bleeding) and fibroids may be sources of uterine pain. In these cases it is essential that **ALL** endometriosis is excised at the same time and that the

woman has no desire to have children in the future. There are less indications for removing the ovaries, this should be discussed with your gynaecologist. Removing the uterus and/or ovaries without removing the endometriosis can lead to continuation of symptoms.



Complementary therapies

Some popular therapies which women have found helpful in reducing symptoms and improve their quality of life include Traditional Chinese Medicine (TCM), Acupuncture and Herbs, Reflexology, Reiki, Abdominal Massage, Pelvic Floor Physiotherapy, Mindfulness, Exercise and Chronic Disease Self-Management Programmes. Many women have also found that dietary changes have helped with symptom relief. The EAI can provide a list of relevant books and resources.

The Endometriosis Association of Ireland was formed in 1987 to provide information and support for all affected by endometriosis. The Association is run on a voluntary basis, mostly by those living with endometriosis.

Membership is via annual subscription, visit www.endometriosis.ie for more information. Membership and fundraising are the main sources of funding for the Association. Funds are used to cover the basic costs of the Association, including rent, printing, postage and website costs. If you wish to fundraise on our behalf please get in touch via email to info@endo.ie

Join our online community
www.endometriosis.ie

Email us at
info@endo.ie

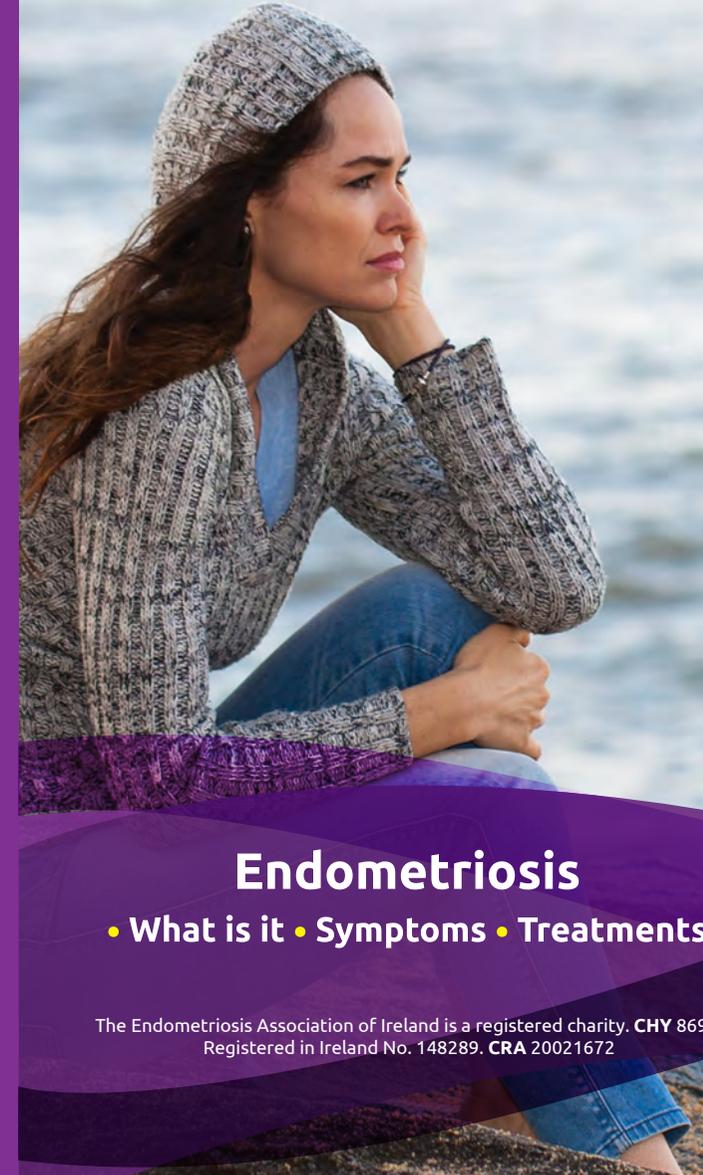
Design by Prettyowldesigns.com | 087 7755 492



The Carmichael Centre for Voluntary Groups,
4 North Brunswick Street, Dublin 7. **CRA** 20021672



eai+ Endometriosis
Association of Ireland
enabling your everyday



Endometriosis

• What is it • Symptoms • Treatments

The Endometriosis Association of Ireland is a registered charity. **CHY** 8693.
Registered in Ireland No. 148289. **CRA** 20021672

What is endometriosis?



Endometriosis is estimated to affect between **2 and 10%** of all women within the general population.

Endometriosis (*en-doh-me-tree-o-sis*) is a word that **1 in 10 women** hear from their gynaecologist, relating to their ongoing pain or as an explanation for their fertility problems. It is one of the most commonly seen gynaecological diseases, yet is poorly understood and not commonly talked about.

Symptoms of endometriosis can begin prior to a girl's first period, and for most women it is throughout their lives. Endometriosis can have a profound effect on a woman's quality of life.

The name endometriosis comes from the word endometrium (lining of the uterus); endometriosis is the presence of similar tissue outside of the uterus. There are important differences between endometrium and endometriosis. Endometriosis is found commonly in the pelvic area, peritoneum, ovaries, bowel and bladder. In rare cases, it can be found in other sites in the body. These deposits cause an inflammatory reaction that can lead to pain, scar tissue and adhesion formation. It is believed that the endometriosis deposits react to the same hormonal stimulation as normal endometrium. This can lead to symptoms which may be worse at certain times of the cycle, in particular at ovulation, prior to and during menstruation (period).

Women with endometriosis commonly experience severe pain, issues with their bowel and bladder.

Endometriosis is one of the leading causes of infertility.

What are the symptoms?

The most common symptom of endometriosis is severe pain before and during menstruation (periods). The pain is far worse than "normal" period cramps and it is not relieved with basic pain medication. The pain can last for days. It is important to realise that to experience extreme pain with your period is not "normal". If you have missed a family or social event due to pain, endometriosis should be considered.

Other symptoms can include:

- Pain prior to or during periods
- Pain at ovulation (mid cycle)
- Pain during or after sex or orgasm
- Painful bowel movements
- Painful urination
- Cyclical rectal bleeding
- Cyclical blood in urine (haematuria)
- Cyclical shoulder pain
- Fatigue
- Subfertility / Infertility

Other symptoms reported by women include:

- Heavy menstrual bleeding or clotting
- Flu like symptoms and / or fever during menstruation
- Migraines
- Continuous pelvic, lower back or leg pain
- Bloating – "Endo Belly"
- Insomnia
- Nausea, diarrhoea, constipation and other intestinal upsets with periods

Some women who have the disease experience no symptoms. Some women with endometriosis experience issues trying to conceive, however it is estimated that **60-70% of women with endometriosis will conceive**. Removing endometriosis and using assisted reproduction techniques can help.

What causes endometriosis?

The simple answer is that nobody knows for sure what causes endometriosis, or why some women develop endometriosis and others do not. Several theories have been proposed; it is most likely that women are born with a finite amount of endometriosis. It is thought to have a strong genetic link, and women with first degree relatives with endometriosis have a higher risk of having endometriosis.

How is it diagnosed?

The symptoms outlined above can suggest to a doctor that a woman may have endometriosis, but many of the symptoms can be caused by other conditions. Endometrioma (endometriosis cyst on the ovary also called "chocolate cyst") or deep nodules may show up on ultrasound or MRI scan, but the only definitive way to diagnose the condition is by laparoscopy with the excised tissue sent to the laboratory for confirmation.

Laparoscopy is a keyhole surgery that allows a gynaecologist to look directly inside the pelvis through a small tube. A laparoscopy is carried out under general anaesthetic and this is usually a day procedure.

It is important to choose a gynaecologist who can remove the endometriosis at diagnosis. Multiple surgical treatments for endometriosis carry a risk of reducing ovarian reserve (fertility) and causing chronic pain.

Managing endometriosis

Endometriosis is a long term condition. If you have been diagnosed with endometriosis you may find that you need extra support from family and friends. You may need to speak to your school/college/workplace occupational health representative. It is also very important to establish a good relationship with your GP and gynaecologist, so as to get the best course of treatment for you.

As with any long term condition, looking after your general health is important will help you keep a positive attitude. There are many self-help opportunities available.