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Endometriosis

Endometriosis is disabling in many ways. Emotions, such as fear, guilt, anger, and depression are common; physical symptoms, such as abdominal pain, menstrual pain, and pain experienced with sexual relations may be long term and debilitating.

The endometrium is the lining of the uterus that builds up and sheds each month with the menstrual cycle. Endometriosis is defined as “the presence of endometrial tissue outside of the uterus.” These “endometrial implants” can attach to areas within the pelvic cavity, including the ovaries, fallopian tubes, the ligaments which support the uterus, the area between the vagina and the rectum, the outer surface of the uterus, and the lining of the pelvic cavity. The intestines, rectum, bladder, cervix, vagina, and vulva may also be affected. This widespread distribution of the endometrial lesions accounts for various symptoms women experience as the result of these lesions bleeding at the same time of the menstrual cycle. These symptoms may result in the inability to perform work duties or attend school. Symptoms include:

- Pain during and after sexual activity.
- Painful menstruation
- Heavy bleeding or irregular menstrual bleeding
- Fatigue
- Painful bowel movements, bleeding, diarrhea, constipation
- Back pain
- Bloating

Any of the above symptoms should lead a woman to seek consultation with her physician. During the history-gathering process, the physician will encourage the client to discuss her symptoms. Historically, women have been told that painful periods are “part of being a woman” and “to be expected”. This has led many women to question their pain symptoms, and delay seeking appropriate medical attention. The extent of the symptoms experienced is frequently unrelated to the stage of disease diagnosed. The following questions may help with diagnosing Endometriosis:

- How old were you when you started your period?
- How long have you been having pain during your period?
- Describe the pain you experience when you get your period.
- Do you have any pain when you are not menstruating?
- Do you experience any bleeding when you are not having your period? If so, when?
- What do you take for pain? Is it effective? How often do you need to take it?
- Do you experience any pain when you have a bowel movement, or when you urinate?
- Do you have any bleeding when you urinate or have a bowel movement?
- How is your energy level?
- How long have you been experiencing pain symptoms?
- Have other members of your family experienced symptoms like this?
- Who do you have to support you when you have pain?

Infertility is a major consequence of endometriosis. As much as 60% of women who are treated for infertility have endometriosis.

Once the diagnosis is suspected by the history and physical exam, a laparoscopy should be performed in order to make a definite diagnosis. This surgical operation, performed under general anesthesia, involves inserting a thin tube with a light source through a small incision at the belly button. All of the pelvic and abdominal organs are visualized and carefully inspected for the presence of endometriosis. When the disease is found, it can be treated at the same time by destroying the implants and removing scar tissue, usually resulting in the complete relief of pain. To prevent recurrence of disease, hormonal therapy is recommended, until pregnancy is desired.

Despite the fact that Endometriosis affects an estimated 5 million women, research on the disease remains scant. Support groups may be helpful, such as the Endometriosis Association. Their web site is: www.EndometriosisAssn.org.