

hormones. The purpose of these medicines is to control the hormone stimulation of the endometriosis areas. These medicines are usually prescribed for 6 months, but this varies from woman to woman.

If you take a medicine to control your hormones, both the lining of the uterus and the misplaced endometrial tissue will decrease or stop bleeding each month. This should stop the buildup of cysts and scar tissue and swelling outside the uterus. The best and most effective drug treatment allows your body to heal the endometriosis as much as possible by stopping your menstrual periods for about 6 months.

Some of the medicines used for treatment of endometriosis are very expensive. They are mainly used if you have endometriosis and are also trying to become pregnant.

Sometimes surgery may be necessary, for example, if you have large pieces of endometrial tissue in your pelvis. In many cases, having conservative surgery (removing or burning off the areas of endometrial tissue) as well as taking medicines is very helpful.

In severe cases, possible treatment is to surgically remove the organs containing the growths (such as the fallopian tubes, uterus, and the ovaries). If your uterus is removed, you will not be able to become pregnant.

How long will the effects last?

No treatment has been found yet that is 100% effective. All current therapy offers some relief from the symptoms but not a cure. Endometriosis may come back or get worse after hormone therapy or surgery.

How can I take care of myself?

Keep a careful record of your symptoms. The

easiest way to do this is to assign a number to each of the symptoms you have and record them by number on your calendar for three months. Record all symptoms, including any time lost from work and leisure activities. Report the symptoms to your doctor. Take your calendar with you to your appointment. If you have not yet been diagnosed with endometriosis, your provider may not suspect endometriosis without this information.

Try the following recommendations for easing your pain:

- Take warm baths.
- Rest.
- Wear loose clothing.
- Use a hot water bottle or heating pad on your abdomen.
- Avoid constipation by increasing the fiber in your diet.
- Do relaxation exercises.
- Listen to soft music and breathe slow, deep breaths.
- Take pain medicine as recommended by your doctor.

What can be done to help prevent endometriosis?

Endometriosis is a condition that cannot be prevented or cured. However, treatment can help control the symptoms.

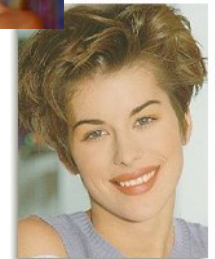
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What is Endometriosis?



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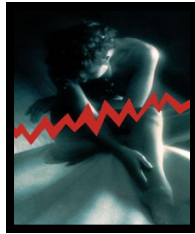
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What is Endometriosis?

The tissue that normally lines the inside of the uterus is called the endometrium. The uterus is the organ at the top of the vagina. Babies develop in the uterus, and menstrual blood comes from the uterus.



In some women endometrium grows outside the uterus. When this happens a woman has a condition called endometriosis. The most common areas for this abnormal growth of endometrium are the reproductive organs (the ovaries, fallopian tubes, and uterus). Endometrium may also grow on the intestines, bladder, rectum, and the lining of the pelvic area and abdomen.

This misplaced tissue responds to the hormones of the menstrual cycle and bleeds each month in the same way the lining of the uterus responds to hormones. However, if the tissue is not in the uterus, the blood shed from the tissue has no way to leave the body. When the tissue bleeds, cysts, adhesions, and scar tissue form and the area around the endometriosis thickens. Very rarely, endometriosis becomes cancerous.

How does it occur?

Why some women develop endometriosis is not known. There are many theories, but none of them explains all cases. One theory suggests that in some women some of the endometrial tissue flows backward during menstrual flow into the fallopian tubes and abdomen, where it attaches and grows. Another theory is that endometrial cells spread to other parts of the body through the lymph system or blood vessels.

Yet another theory suggests that some endome-

trial tissue in the uterus backs up in all women. The immune system may then destroy the misplaced tissue. Women who develop endometriosis, however, may have an immune system that is not able to destroy the misplaced tissue.

Some women may inherit the problem.

What are the symptoms?

Some women have no symptoms. If symptoms occur they may include:

- abnormal or heavy menstrual flow
- back or flank pain before or during the menstrual period
- very painful menstrual cramps
- painful intercourse
- pelvic pain, especially before or during menstrual periods
- painful bowel movements, diarrhea, constipation, or other intestinal upsets during menstrual periods
- painful urination or feeling the need to urinate often during menstrual periods
- trouble becoming pregnant.

How is it diagnosed?

Your doctor will ask you about your symptoms. You will have a pelvic exam to check for cysts or nodules or any abnormal tenderness or thickening in your pelvic area. You may have blood tests.

You may need a 1-day surgical procedure called a



laparoscopy for diagnosis. You are given an anesthetic before the



procedure so you will not feel any pain. Then a small cut is made near the navel and your abdomen is filled with a gas (carbon dioxide). Your doctor inserts an instrument called a laparoscope through the cut and into your abdomen to look at the organs and the pelvic cavity.

With laparoscopy, your doctor can see the size, location, and number of endometrial growths. Sometimes a piece of tissue is removed (a biopsy) to help make a diagnosis.

Other tests you may have are:

- ultrasound scan
- CT (computed tomography)
- MRI (magnetic resonance imaging).

How is it treated?

Endometriosis is a disease that can get more severe as you grow older. However, there are many ways to lessen the symptoms and complications. The treatment depends on the severity of the symptoms, the location and degree of endometriosis, your age, and your plans for childbearing.

If the only symptom is mild premenstrual pain, the only treatment necessary may be a medicine such as aspirin or ibuprofen to relieve the pain.

If you have a diagnostic laparoscopy, your surgeon may use a laser to remove the abnormal tissue, especially if you have a mild case of endometriosis.

Your doctor may prescribe birth control pills, progesterone pills, or other drugs to control your