

# Endometriosis

## General Information

Endometriosis happens when the lining of the uterus grows outside of the uterus. This tissue responds to hormone changes like the uterus does.

During your period, your uterus and the endometrial tissue outside the uterus both bleed. The endometriosis may be found on your ovaries, fallopian tubes, vagina, bladder, bowel and rectum. In rare cases, it may grow in other parts of the body and in between organs.

Endometriosis is common in women ages 20 to 40. The cause is unknown and there is nothing you can do to prevent it. Endometriosis can make getting pregnant difficult. Sometimes pregnancy makes the symptoms better.

After menopause — when you stop having your period for at least 12 months in a row (without being pregnant) — your body stops making estrogen. Estrogen is a hormone that tells your brain to signal your ovaries to release an egg once a month. It makes your uterine lining thicker. Without estrogen you do not have periods and the endometriosis will end.

## Symptoms

Symptoms of endometriosis include:

- pelvic pain (during intercourse, bowel movements or urination, and before and during periods)
- spotting
- infertility (being unable to get pregnant)
- low back pain.

The amount of pain you have does not tell you how severe your condition is. You may have mild pain and severe endometriosis, or a lot of pain and mild endometriosis. It is important to call your doctor if you have any of these symptoms, because they can also be signs of other problems.

## Diagnosis

Your doctor may be able to tell if you are at risk for having endometriosis based on your history and a pelvic exam.

A laparoscopy is minor surgery and may be done to confirm the diagnosis. You will have general anesthesia to put you to sleep. The doctor makes a small cut near your belly button and inserts a lighted scope into your abdomen.

This lets the doctor look at your pelvic organs and see the endometriosis.

## Treatment

How your doctor decides to treat your endometriosis depends on your symptoms and if you want to have children. Treatment may include medicine, surgery or both.

- Hormones are the medicines used to treat endometriosis. Birth control pills keep your periods regular, lighter and shorter. Your pain should also be relieved. Other hormones can lower estrogen levels by “turning off” the ovaries causing a temporary menopause. This treatment can last for 6 months.

*(over)*

Symptoms come back in about half of the women treated. Other types of hormones can shrink the endometrial tissue but the symptoms usually return after 2 to 3 months.

- Surgery can burn or vaporize endometriosis and the scar tissue around it. The laparoscopy is the most common type of surgery done for endometriosis.

Another type of surgery is a laparotomy. This surgery involves a larger incision in your abdomen to let the doctor see more of your pelvis.

Surgery can treat both pain and infertility, but the symptoms may return. To reduce the chance that it may reoccur, you may need both medicine and surgery. If symptoms do not improve after this treatment, your doctor may suggest removing your uterus, ovaries and fallopian tubes. This is major surgery that means you would no longer be able to have children.

Endometriosis can often be treated successfully. You may need more than one kind of treatment. See your doctor if you have symptoms of endometriosis.