

Endometriosis Diagnosis and Management

Lifestyle and Simple Analgesia

The pain experienced with endometriosis usually involves multiple factors and systems, including bowel, bladder, pelvic floor, stress, nervous system overactivity, disturbed sleep or mood problems. A period, mood and pain diary can be helpful to identify timing, specific precipitant activities, foods or stressors.

Exercise

Exercise is fundamental to a healthy lifestyle and pain management. Aim for at least 30 minutes of moderate exercise (walking, riding or swimming to elevate heart rate) per day.

Sleep

Establish a sleep routine that allows for at least seven hours per night. Avoid screen technology in the hour before and in bed. Get 15 minutes of morning sun.

Diet

Eat a balanced diet, avoiding highly processed foods. Limit the intake of foods containing saturated fat, added salt, added sugars. Avoid any precipitating foods and moderate alcohol and caffeine intake.

Stress

Practice mindfulness to focus, centre, and connect as you breathe. Yoga.

Physical support

Relaxing hot bath or use a hot water bottle.

Simple pain relief

Start pain relief early and take this regularly for the first two days:

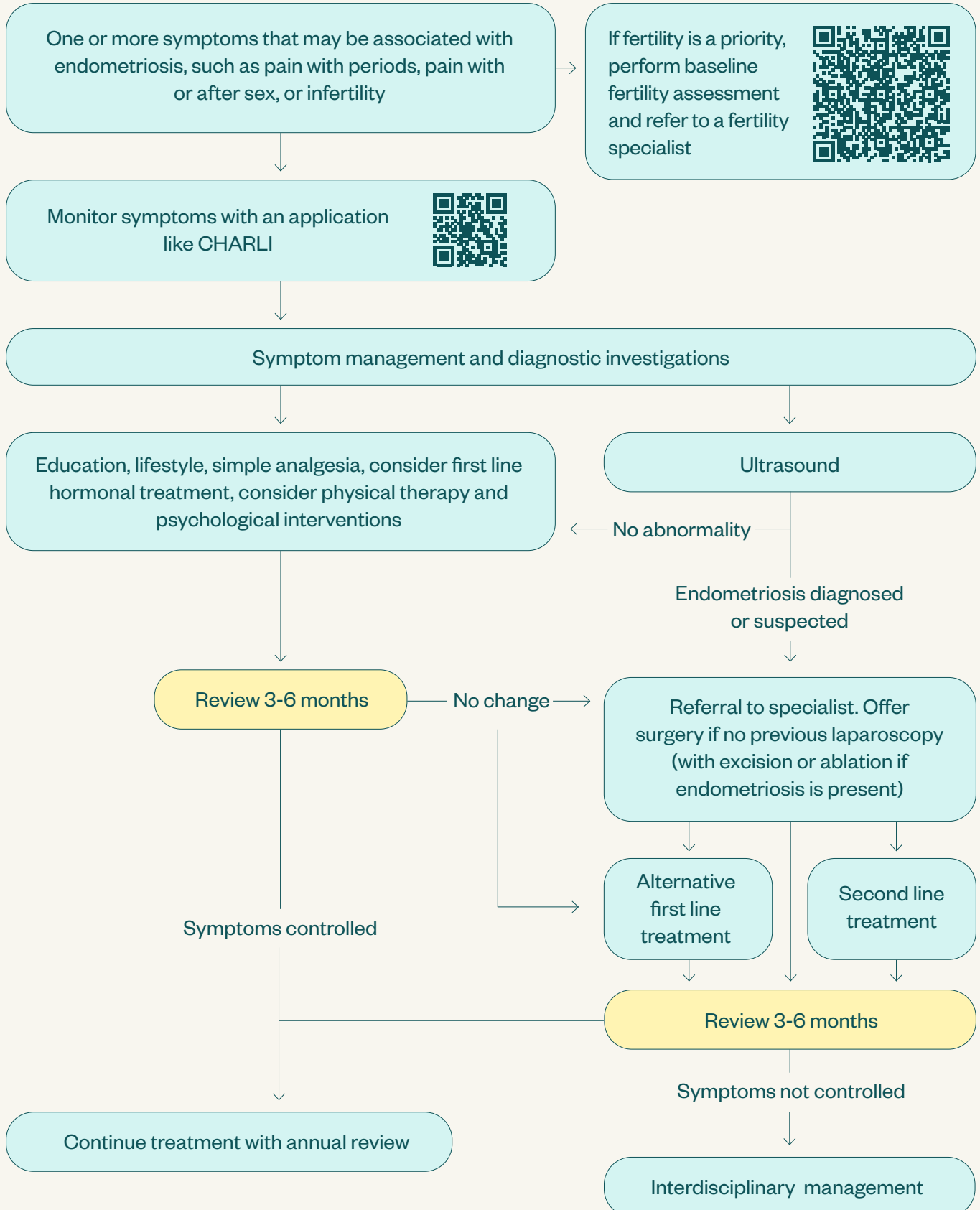
- Paracetamol 500mg tablets up to two tablets four times per day.
- Ibuprofen 200mg tablets up to one tablet four times per day.

Hormonal Therapy in Endometriosis

Formulation	Mechanism of action	Advantages	Disadvantages	Recommendation
Ethinyl estradiol + progestin (Microgynon 30, Yasmin, Yaz, others)	Inhibition of menstruation Atrophy of lesions	Accessible Low side effects Reduced pain	Oestrogen risks	First Line
Drospirenone (Slinda)	Inhibition of menstruation Atrophy of lesions	Low side effects Reduced pain Mineralocorticoid - Androgenic -	Cost Menstrual disturbance	First Line
Levonorgestrel (Mirena)	Inhibition of menstruation	Five yearly Low side effects Reduced pain in most No gonadotropin effect	Menstrual disturbance Expulsion	First Line
Dienogest (Visanne)	Inhibition of menstruation Atrophy of lesions	Low side effects Reduced pain Oestrogenic + Antiandrogen + Glucocorticoid - Androgenic -	Cost Menstrual disturbance Reduction in BMD	First Line
Medroxy-progesterone (depot 150mg 3 monthly or oral 20mg daily)	Inhibition of menstruation Atrophy of implants	Accessible Three-monthly Reduced side effects Reduced pain No oestrogen risks	Delayed conception Gonadotropin + Glucocorticoid + Reduction in BMD after 35	First Line
Etonorgestrel (Implanon)	Inhibition of menstruation Atrophy of lesions	Accessible Three-yearly Low side effects Reduced pain No oestrogen risks	Contraception Gonadotropin + Glucocorticoid – Irregular menses	First Line
Goserelin (Zoladex) Nafarelin (Synarel)	Downregulation	Effective Reduced pain	Delays conception Reduced bone mineral density Hypo-oestrogenic symptoms	Second Line
Relugolix (Ryeqo)	LHRH antagonist	Effective Reduced pain Reduced hypo-oestrogenic symptoms	Delays conception Reduced bone mineral density Hypo-oestrogenic symptoms	Second Line

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The diagnosis of endometriosis often takes many years for patients. This diagnostic delay may have a substantial impact on the quality of life for patients, which is why it is so important to notice the signs and start investigations sooner rather than later. Endometriosis can be diagnosed and managed in a primary care setting, but for some patients immediate referral to a Gynaecologist or interdisciplinary team may be beneficial¹.



Fertility Priority

Endometriosis causes infertility in different ways. The female reproductive system, including the ovaries and fallopian tubes can be compromised easily. When the fallopian tubes are affected, the delicate fimbrial ends of the tubes are matted together (the fimbriae sweep the surface of the ovaries picking up the egg during ovulation) and when they are heavily affected by endometriosis, they lose this function.

Endometriosis may also induce inflammatory changes within the pelvis creating a 'hostile' environment for the egg, sperm and embryo. The endometrium is often affected functionally. This in turn can affect the implantation of an embryo, finally, persistent pain will predictably interfere with conception.

For those patient's looking to conceive, it can be beneficial to see a Fertility Specialist to support them on their journey to parenthood.

