

# ENDOMETRIOSIS

## TO YOUR HEALTH - PATIENT EDUCATION HANDOUT

# 10.12

### DESCRIPTION

Endometriosis is a condition in which endometrial tissue resembling the lining of the uterus occurs in locations outside of the uterus.

### FREQUENT SIGNS AND SYMPTOMS

- Symptoms may begin suddenly or develop over years.
- Pelvic pain that may occur at anytime. It may increase during menstrual periods, especially the last days.
- Pain with sexual intercourse.
- Premenstrual spotting, blood in the urine, or blood in the stool (sometimes)
- Back pain
- Infertility

### CAUSES

Unknown. One theory is that, during menstruation, some of the menstrual tissue backs up through the fallopian tubes into the abdomen, where it implants and grows. Another theory is that endometriosis may be genetic, or that certain families may have risk factors that lead to endometriosis. The body's immune system may also play a role in the cause.

### RISK INCREASES WITH

- Women who don't become pregnant or who delay childbirth
- Women with family history of endometriosis
- Medical conditions that involve the cervix or vagina

### PREVENTIVE MEASURES

There are no specific preventive steps.

### EXPECTED OUTCOME

It is an ongoing, long-term disorder that may get worse over time. Symptoms can often be relieved with treatment. Women with severe disease may have less success with treatment. The ability to become pregnant depends on factors such as severity of the disorder and success of treatment.

### POSSIBLE COMPLICATIONS

- Infertility
- Severe pain that causes depression, stress, and problems with daily living activities.

- Adhesions (scar tissue) of pelvic organs.
- Endometriosis can recur after treatment
- Cysts and pelvic masses called endometriomas
- An increased risk of cancer is a possibility

### GENERAL MEASURES

- Your health care provider will do a physical exam and a pelvic exam. Medical tests may include laparoscopy. A thin, lighted tube (called a laparoscope) is inserted through a small incision (cut) in the abdomen to view internal organs and to sometimes remove tissue. Open surgery (laparotomy) may be needed for diagnosis.
- Treatment may include drug therapy, surgery, or both.
- Treatment will vary depending on the severity of the disease and patient's age and desire for future pregnancy.
- Different procedures are used for treatment. The options will be explained to you. A hysterectomy may be suggested for women who do not desire pregnancy.
- Use a heating pad or take warm baths to relieve pain. Cold therapy may help. Use ice packs on the abdomen.
- Put a pillow under your knees when you rest or sleep. When lying on your side, pull the knees up to the chest.

### MEDICATION

- You may use nonprescription drugs, such as nonsteroidal anti-inflammatory drugs, to relieve minor pain.
- Stronger pain relievers may be prescribed.
- Hormonal drugs to stop ovulation may be prescribed.

### ACTIVITY

- Exercise, such as walking, may help to relieve pain.
- You may be taught to do Kegel exercises to help strengthen the pelvic floor muscles.

### DIET

- Alcohol and caffeine can make the pain more severe in some women.

### NOTIFY OUR OFFICE IF...

- Severe pain
- Nausea or vomiting

## Student Health Center

## WWW.SIU.EDU/~SHC

This information is for educational purposes only. Consult your doctor for specific medical advice, diagnosis and treatment.



## 618-453-3311

Dial-A-Nurse is available after-hours until 10:30 p.m. during fall and spring semesters. In case of emergency dial 911.