

Fast Facts

Endometriosis

- When the tissue that usually lines the inside of uterus (the endometrium) grows outside of it
 - Typically, involves your ovaries, fallopian tubes, and the tissue lining the pelvis
 - Rarely it'll travel to areas outside of the pelvis
- During menstrual cycle, endometrial tissue thickens, breaks down, and bleeds (endometrial tissue that is outside of uterus is no different)
- Problem is that it doesn't have anywhere to exit your body, so it becomes trapped, resulting in surrounding tissue becoming irritated and eventually developing scar tissue and adhesions (bands of fibrous tissue that result in pelvic tissue and organs sticking to each other)
 - If ovaries are involved, can have cysts (endometriomas)
- Usually develops several years after the onset of menstruation
- Exact cause unknown, but several factors may contribute

<i>Symptoms</i>	<i>Treatment</i>	<i>Prevention</i>
<ul style="list-style-type: none"> -Pelvic pain (usually associated with menstrual periods) -Lower back -Abdominal pain -Discomfort during or after sex -Pain with bowel movements and urination (usually occurs during menstruation) -Heavy menstrual periods -Bleeding between periods -Fatigue -Bloating -Constipation -Diarrhea -Nausea 	<ul style="list-style-type: none"> -Depends on the severity of symptoms and whether you hope to become pregnant <p><i>Medications:</i></p> <ul style="list-style-type: none"> -Nonsteroidal anti-inflammatories (NSAIDs) -- ibuprofen or naproxen -Hormone therapy (birth control pills, patches, vaginal rings, gonadotropin-releasing hormone (Gn-RH) agonists and antagonists, progestin therapy, and aromatase inhibitors) <p><i>Surgery:</i></p> <ul style="list-style-type: none"> -Remove the endometrial implants while preserving uterus and ovaries 	<ul style="list-style-type: none"> -No way to prevent -Try reducing the number of complications by seeking treatment early

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