

Swapnil K., Priya R.

IDENTIFICATION AND TREATMENT STRATEGIES FOR ENDOMETRIOSIS

Tutor: PhD, associate professor Savitskaya V.M.

*Department of Obstetrics and Gynecology with a Course of Advanced Training and Retraining
Belarusian State Medical University, Minsk*

Endometriosis is a prevalent and chronic gynecological condition characterized by the growth of endometrial-like tissue outside the uterus, leading to significant physical and psychological burdens on affected individuals. It impacts approximately 10% of women of reproductive age and is associated with debilitating symptoms such as severe dysmenorrhea, chronic pelvic pain, and infertility. Despite its prevalence, the pathophysiology of endometriosis remains poorly understood, necessitating ongoing research and clinical attention to improve diagnosis and management strategies.

This review aims to provide a comprehensive evaluation of the epidemiology, pathophysiology, diagnosis, and management of endometriosis, synthesizing the best available evidence and clinical guidelines to inform obstetric and gynecological practice.

A targeted, non-systematic search of MEDLINE (1960 to January 2022) was conducted using the keyword "endometriosis" in combination with terms related to pathophysiology, diagnosis, treatment, pain, infertility, surgery, and medications. The review focuses on studies involving human subjects, clinical guidelines, systematic reviews, and randomized trials, highlighting key findings relevant to the diagnosis and management of endometriosis.

Endometriosis presents with a spectrum of symptoms that can vary in severity and may not correlate with the extent of the disease. Diagnosis primarily relies on clinical evaluation, including symptom assessment, pelvic examination, and imaging studies, with transvaginal ultrasound being the first-line investigation. Recent guidelines recommend a clinical diagnosis based on symptomatology and imaging, reducing reliance on surgical confirmation, which can delay treatment initiation. Treatment options include hormonal therapies aimed at symptom relief through ovulation and menstruation suppression, surgical interventions for definitive diagnosis and management, and multidisciplinary care approaches for chronic pain management. The efficacy of hormonal treatments, including combined hormonal contraceptives and progestins, ranges from 60% to 80%, with considerations for individual patient preferences and side effects.

The review also highlights the importance of recognizing coexisting pain conditions and the need for tailored, patient-centered management strategies. Surgical options, including laparoscopic excision, may provide symptom relief but are not curative, with recurrence rates noted post-treatment. The Endometriosis Fertility Index serves as a useful tool for predicting outcomes in patients seeking fertility treatment.

Endometriosis is a complex condition with significant implications for reproductive health and quality of life. Early recognition and diagnosis are critical for timely intervention. Primary care providers play an essential role in the initial diagnosis and management, while referrals to specialists are warranted for advanced cases requiring surgical or second-line medical treatment. A multidisciplinary approach is recommended for managing chronic pain associated with endometriosis, emphasizing the need for comprehensive care strategies to improve patient outcomes.