



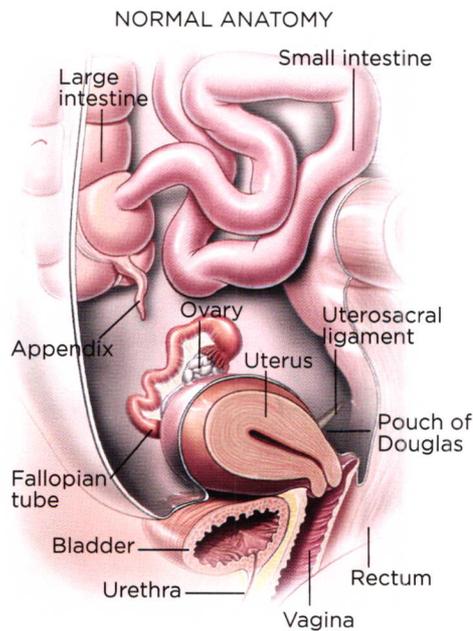
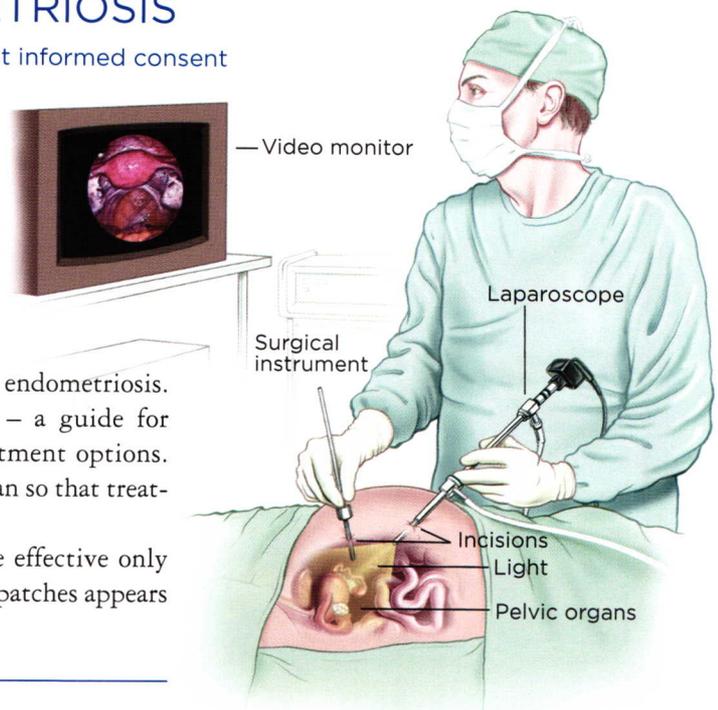
THE LAPAROSCOPIC TREATMENT OF ENDOMETRIOSIS

Patient information to assist informed consent

Endometriosis is a condition where tissue similar to the endometrium (that lines the inside of the uterus) also grows outside the uterus. The most common place to find growths or “patches” of endometriosis is on the ovaries, fallopian tubes, uterus, large intestine, appendix, bladder, uterosacral ligaments, pouch of Douglas and peritoneum (the fine membrane that covers the pelvic organs). See the illustration, below.

Symptoms and the extent of patches differ in every woman with endometriosis. The patient education pamphlet “Understanding Endometriosis – a guide for women” provides information on types, causes, diagnosis and treatment options. After diagnosis, the gynaecologist usually outlines a management plan so that treatment options will meet the individual needs of the woman.

Hormone tablets may be helpful in relieving symptoms but are effective only while a woman continues to take the tablets. The surgical removal of patches appears to be more likely to provide longer-term relief from symptoms.



Principles of surgical treatment

Surgical treatment may be able to delay or stop the progress of the condition. The objectives of surgery are:

- to diagnose whether endometriosis is present, and
- to remove or destroy patches as much as possible from the pelvic organs.

Surgery may be recommended to:

- treat pain and discomfort that have not been adequately controlled with medical therapy
- improve fertility, which can be diminished by endometriosis
- remove other areas of endometriosis and preserve fertility as much as possible. The extent of surgical treatment depends on the severity of the condition, the woman’s age, her plans for pregnancy, and other health issues

- remove an endometrioma (chocolate cyst) from an ovary.

Laparoscopy is usually preferred to an open operation through a larger incision (laparotomy) because:

- laparoscopy reduces the risk of adhesions (scar tissue on pelvic organs) that can cause pain and may contribute to infertility
- the laparoscope provides excellent close-up views of patches (if present)
- incisions are smaller and less painful during healing, with a better cosmetic result
- recovery time is faster.

If no patches are found during laparoscopy, or if removal of patches is a minor procedure, the laparoscopy may be done as a day procedure. However, a patient may have to stay in hospital longer if more extensive removal of patches is needed; the procedure may be performed in two stages.

IMPORTANT: FILL IN ALL DETAILS ON THE STICKER BELOW

DEAR DOCTOR: When you discuss this pamphlet with your patient, remove this sticker and put it on the patient’s medical history or card. This will remind you and the patient that this pamphlet has been provided. Some doctors ask their patients to sign the sticker to confirm receipt of the pamphlet.

Your Doctor

This patient education has been reviewed by obstetricians and gynaecologists in Australia and New Zealand