

The Efficacy of Medical Treatment and Laparoscopic Surgery in Endometriosis

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Abstract

Background Endometriosis is one of the most common diseases in gynecology.

Aim: to discuss whether the combination of laparoscopic surgery and medical therapy is the most appropriate treatment for endometriosis.

Subjects and Methods: 50 female patients treated for infertility and pelvic pain who underwent a laparoscopic surgical procedure to remove the foci of endometriosis in were retrospectively analyzed. After the surgical procedure and Medical treatment, patients were observed over a period of 12 months.

Results: 50 female patients with primary infertility, in whom endometriosis was diagnosed. In the patients who underwent a surgical procedure, the diagnosed lesions were completely removed surgically. After the procedure, the patients underwent a 12-month-long observation. In 17 out of 50 patients who underwent the surgical procedure, a clinical pregnancy was diagnosed. 11 out of 50 women became pregnant spontaneously, 6 out of 50 patients became pregnant as a result of Induction. The surgical procedure, regardless of its effect on fertility, reported a decrease or discontinuance of ailments which accompanied endometriosis, such as pain in the pelvis minor, dysmenorrhea, and dyspareunia.

Conclusion: Operative laparoscopy is an efficient method for treating infertility and chronic pelvic pain related to endometriosis.

Keywords: Endometriosis, Laparoscopy, Medical treatment.

1. Introduction

Endometriosis is one of the most common diseases in gynaecology, which is characteristic of the presence of glands and submucosa of endometrium outside the uterine cavity. This illness affects 5–10% of the female population at reproductive age (1).

It is the cause of pelvic pain (dysmenorrhea, dyspareunia) and infertility in more than 35% of women of reproductive age. Research shows that in 25–50% of women, infertility is a result of the presence of endometriosis. (2).

Medical therapy alone is relatively ineffective because cumulative recurrence rate of 53.4% was observed 5 years after cessation of therapy (3).

In the diagnostics of endometriosis, laparoscopic imaging of the pelvis is regarded as the gold standard, Surgical treatment decreases pain ablation of endometrial lesions, together with the reduction of adhesions, increases the number of women who become pregnant in relation to the use of diagnostic laparoscopy itself (4, 5).

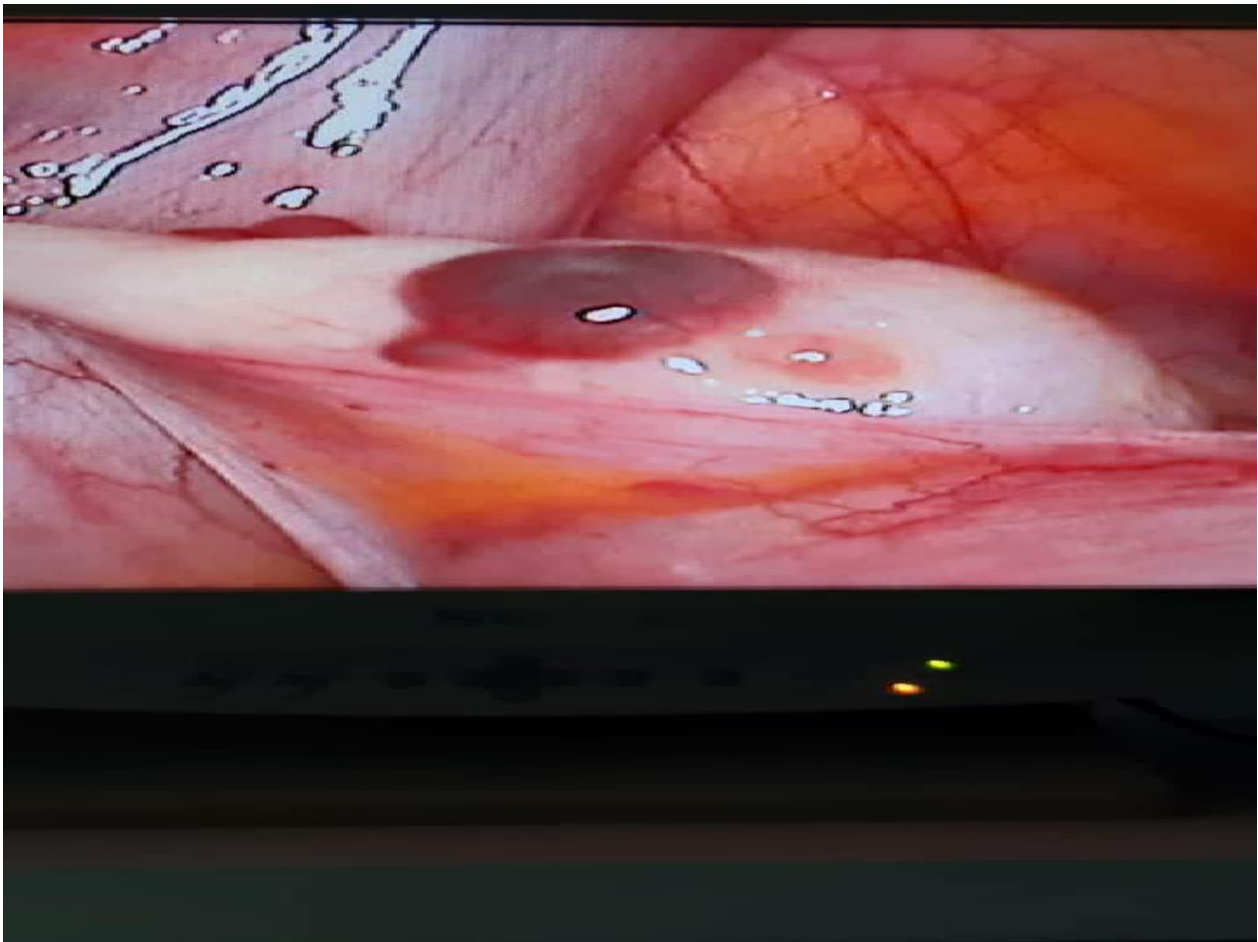
We aimed to discuss whether the combination of laparoscopic surgery and medical therapy is the most appropriate treatment for endometriosis.

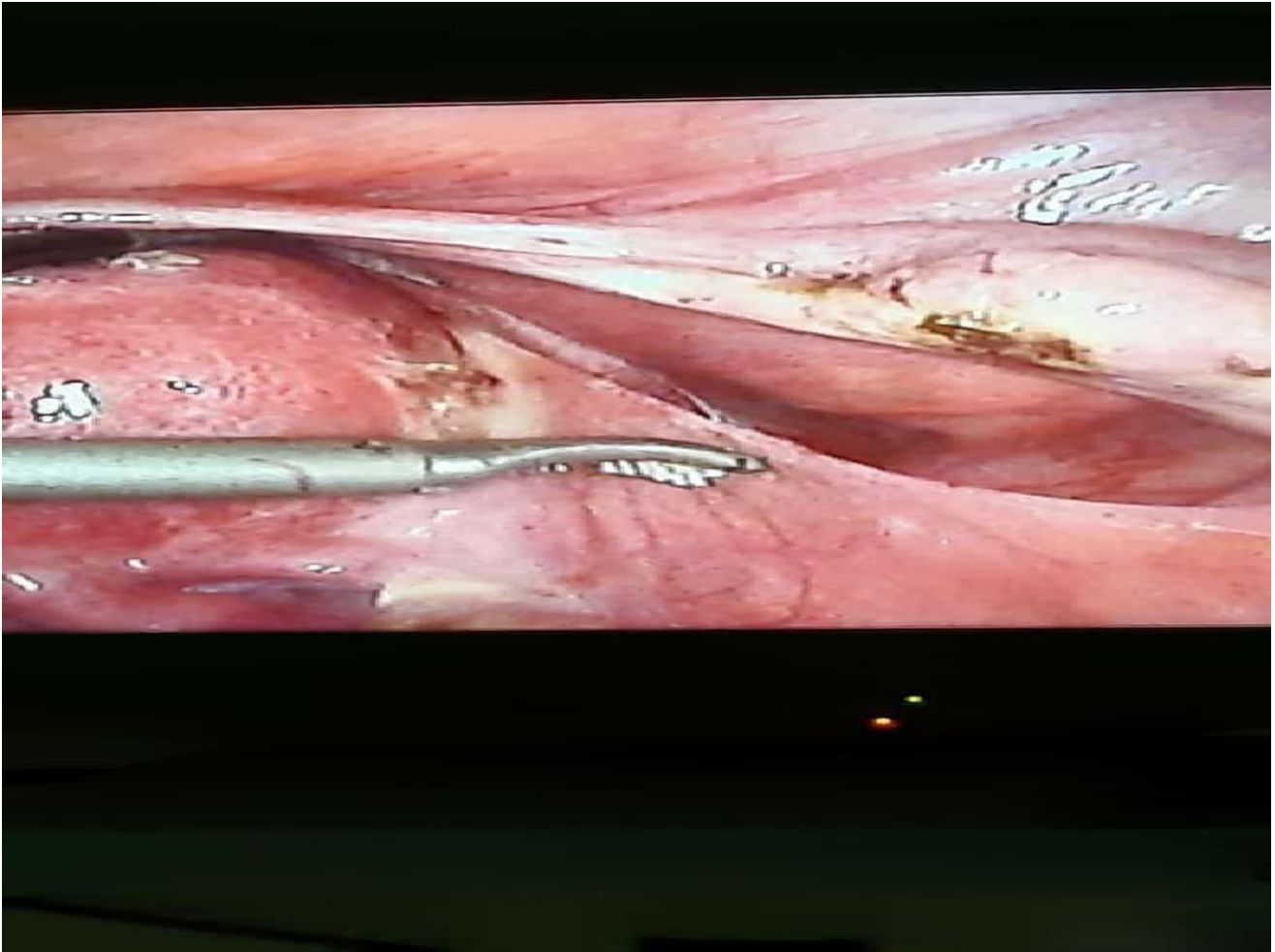
2. Subjects and Methods

50 female patients treated for infertility and pelvic pain who underwent a laparoscopic surgical procedure to remove the foci of endometriosis in were retrospectively analyzed. After the surgical procedure and Medical treatment, patients were observed over a period of 12 months.

3. Results

In 2019–2021, 50 female patients with primary infertility, in whom endometriosis was diagnosed. In the patients who underwent a surgical procedure, the diagnosed lesions were completely removed surgically. After the procedure, the patients underwent a 12-month-long observation. In 17 out of 50 patients who underwent the surgical procedure, a clinical pregnancy was diagnosed. 11 out of 50 women became pregnant spontaneously, 6 out of 50 patients became pregnant as a result of Induction. The surgical procedure, regardless of its effect on fertility, reported a decrease or discontinuance of ailments which accompanied endometriosis, such as pain in the pelvis minor, dysmenorrhea, and dyspareunia.





4. Conclusion:

Operative laparoscopy combined with medical oral contraceptive from 3-6 months after laparoscopy is an efficient method for treating infertility and chronic pelvic pain related to endometriosis.

References.

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