

## Information for Patients

# Endometriosis & Subfertility

## Is there a link between subfertility and endometriosis?

Endometriosis is a common gynaecological problem. It may affect 10-15% of women of reproductive age. It does not necessarily cause infertility or pain.

Minimal to mild endometriosis is common and it is far more likely that you will have no difficulty conceiving naturally.

However, almost 30-50 percent of women with subfertility have endometriosis. Even though there is data to support an association between subfertility and endometriosis, a causal relationship has not been clearly established.

Inflammation from endometriosis may damage the sperm or egg or impair their transport through the fallopian tubes.

In severe cases, the fallopian tube may be blocked by inflammation or scar tissue. The presence of an endometriotic cyst (chocolate cyst) in the ovary might deplete the ovarian reserve of eggs by having a detrimental impact on both egg quality and numbers.

Other theories of causation include impaired implantation, altered hormonal and cell-mediated function, distortion of pelvic anatomy and altered peritoneal function.

### This illustration is a useful way of looking at endometriosis and subfertility:

100 women without endometriosis start trying for a baby - at the end of one year, **84** will be pregnant.

100 women with minimal-mild endometriosis start trying for a baby - at the end of one year, **75** will be pregnant.

100 women with moderate endometriosis start trying for a baby - at the end of one year, **50** will be pregnant.

100 women with severe endometriosis start trying for a baby - at the end of one year, **25** will be pregnant.

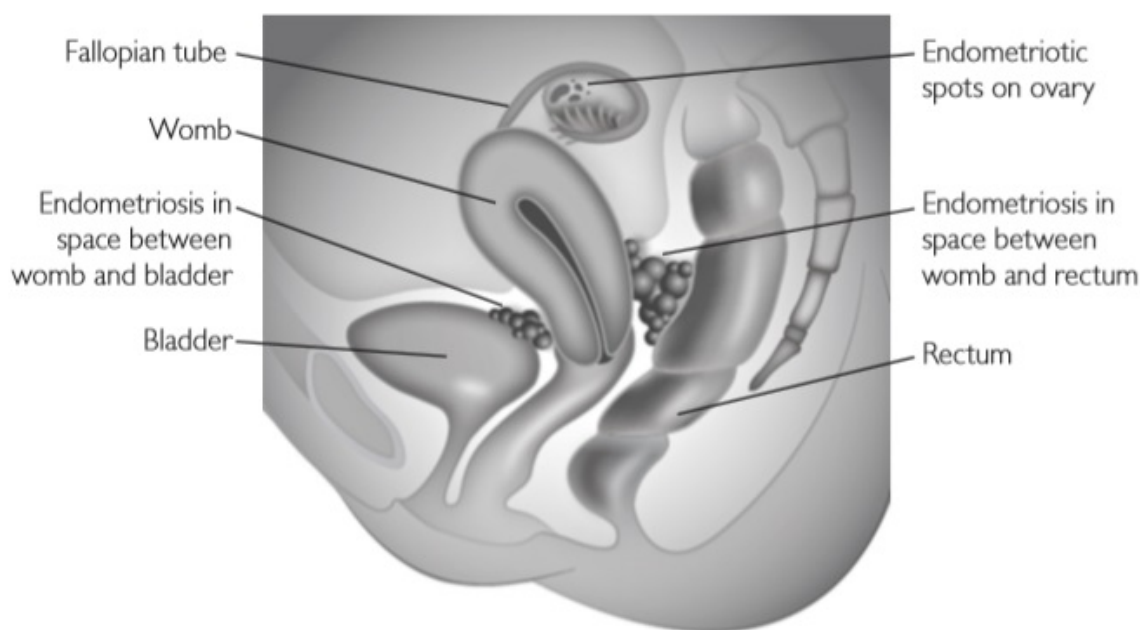


Image from [www.rcog.org.uk](http://www.rcog.org.uk)

## What is the impact of endometriosis on treatment options for subfertility?

There are many causes of infertility and sometimes multiple causes are present. Therefore, it is important that treatment options are individualised after a thorough history and assessment. This would include duration of subfertility, age, frequency of intercourse, hormonal imbalances, lifestyle, previous treatments, and pelvic pain.

### Medical Therapy

Medication (both non-hormonal and hormone treatment) can improve endometriosis related pain, but there is no evidence that it improves fertility. In fact, many hormonal treatments suggested for endometriosis pain control inhibit ovulation and therefore, act as contraceptives.

### Surgery

Surgery for mild or moderate endometriosis results in a small but significantly increased chance of having a baby. This could involve either removal (excision) of disease or ablation with laser / diathermy. With severe endometriosis, it is unsure if excision of disease is associated with increased chance of conception.

### Medically Assisted Reproduction (IVF)

Success of IVF treatment in women with endometriosis tends to be lower than in unaffected women. Women with severe endometriosis tend to have lower success rates than those with mild disease. However, IVF might still be the recommended treatment option for many women suffering with endometriosis and infertility. There is a known benefit in pre-IVF treatment with GnRH agonists (drugs used to bring a temporary, reversible, menopausal state, effectively 'switching off' the ovaries for a while).

## Recommended sites

RCOG, Information for you, endometriosis:

<https://www.rcog.org.uk/globalassets/documents/patients/patient-information-leaflets/gynaecology/pi-endometriosis.pdf>

Endometriosis.uk, Endometriosis, Fertility and Pregnancy:

<http://www.endometriosis-uk.org/sites/default/files/files/Information/fertility.pdf>

ESHRE, Information for women with endometriosis:


<https://www.eshre.eu/Guidelines-and-Legal/Guidelines/Endometriosis-guideline/Patient-version.aspx>

## Useful Contact Details

**If you have any queries relating to appointments then please contact your consultant's secretary, their number can be found on appointment/correspondence letters.**

## Pelvic Pain and Endometriosis Specialist Nurse:

 [endometriosis.nurses@mft.nhs.uk](mailto:endometriosis.nurses@mft.nhs.uk)

 07815 493 432 Available: Monday, Tuesday, Thursday & Friday 09:00 - 15:00

*Please note that the phone is an answer phone service and your message will be triaged and your call returned. The phone is not staffed on Wednesdays & Weekends. We will reply to all emails and messages on our return.*