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TITLE

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AUTHOR/S

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ABSTRACT

Endometriosis therapeutic approaches

Introduction

As the impact of endometriosis on the health of women in this more than 300 years ago first described disease remains of high importance one of our Academy Focus highlights this disease. Novel insights into the pathogenesis of endometriosis as well as the art of clinical markers and new surgical possibilities allow a better treatment of clinical symptoms: Chronic pelvic pain, inflammation, dysmenorrhoe, subfertility and disturbances in Reproduction. I would like to highlight the mechanism behind vascularization and immune factors in endometriosis and discuss the current pharmaceutical options for pain management and surgical excision for our patients.

Methods:

In a comparison of medical and surgical options we evaluated four hundred and fifty endometriosis patients in three treatment groups.

1. Medical treatment with gestagens
2. Surgical treatment by laparoscopic resection
3. Combined treatment by laparoscopic resection and medical treatment

Results:

The three treatment options - independent of the initial Endoscopic Endometriosis Classification (EEC) stage – achieved an overall cure rate of 50% or higher. A cure rate of 60% was achieved by the combined treatment, of 55% by the exclusively hormonal therapy and 50% by the exclusively surgical treatment. An overall pregnancy rate between 55% and 65% was achieved in the combined treatment group (group 3).

Conclusions:

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In the battle for the most effective current treatment of genital endometriosis, this clinical randomized study shows the lowest incidence of recurrences for the combined surgical and medical treatment and improved pregnancy rates for any medically treated patients. The highest cure rate (stage 0) of endometriosis was achieved in the combined surgically and medically treated group. As result in 2017 we still advise medical and surgical treatment.