



# Endometriosis: What you need to know

**T**he uterus, or womb, is where a fetus grows in a person's body when they are pregnant. The uterus is lined with tissue known as the endometrium, which is key for implantation and growth of a fetus and the placenta. The endometrium is critical to a healthy pregnancy.

When someone of reproductive age is not pregnant, that tissue, along with some blood and mucus, sheds each month. This process is known as menstruation, or a period.

For people with a condition called endometriosis, tissue that is similar to the lining of the uterus grows in other places in their body, including:

- On the ovaries
- On the fallopian tubes, which carry eggs from the ovaries to the uterus
- Behind the uterus
- On the tissues that hold the uterus in place
- On the bowels or bladder

When this tissue grows in other places in the body, it can cause inflammation, bleeding, pain or irritation, and other complications.

## Who is affected?

Endometriosis can affect anyone who has a period. Endometriosis is common. It occurs in about 10% of women of reproductive age.

### What are some risk factors?

- Periods that started at an early age (before age 11)
- Short monthly cycles (fewer than 27 days)
- Heavy periods that last more than 7 days
- Having other family members with endometriosis

### What are the symptoms?

The main symptoms of endometriosis are pelvic pain and infertility or problems getting pregnant. This pain can happen anytime and is usually worse during menstruation.

Other common symptoms include:

- Extreme lower abdominal pain or bloating
- Low back pain
- Pain with bowel movements or urination
- Nausea, vomiting, or feeling lightheaded
- Heavy periods or spotting in between periods
- Pain during sex
- Fatigue

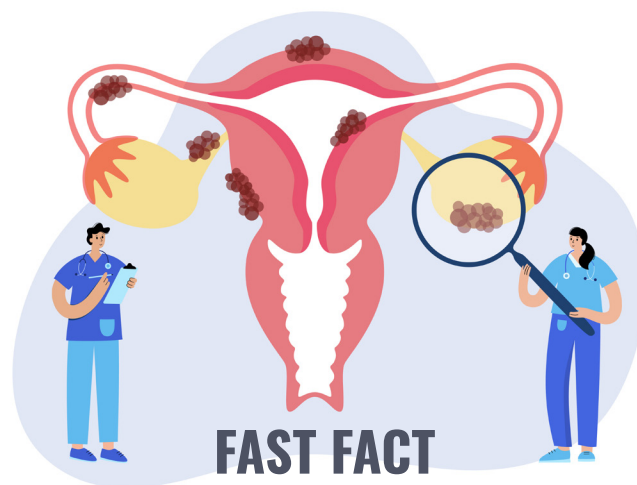
Those with endometriosis may have some or many of these symptoms. Because endometriosis can be difficult to diagnose, be sure to discuss all of your symptoms with your health care provider to make sure you are diagnosed correctly.

### How is endometriosis diagnosed?

First, a health care provider will take a full medical history and give a complete physical and medical exam. They will do this before performing a surgery, which is the only way to diagnose endometriosis.

The most common type of surgery to diagnose endometriosis is called a laparoscopy. In this surgery, a surgeon uses a tiny camera attached to a thin tube (called a laparoscope) to see inside the uterus, fallopian tubes, ovaries, and bladder and around the intestines. Sometimes a small sample of tissue, called a biopsy, is taken during surgery to confirm the diagnosis.

Doctors can also use imaging techniques such as an ultrasound or magnetic resonance imaging (MRI) to help diagnose the condition.



**FAST FACT**  
Endometriosis affects as much as  
**10% of women** of reproductive age.

SOURCE: [MEDLINEPLUS](#)

### How is endometriosis treated?

Although endometriosis can't be cured or prevented, it can be treated.

Certain medications that contain hormones, including pills, injections, or nasal spray, can help lessen pain and bleeding. However, symptoms can come back if the medicine is stopped. Over-the-counter pain medication may also be helpful.

Surgical treatments, including laparoscopies and *laparotomies*, to remove small sections of scar tissue are also available. A laparotomy is a more invasive surgery, where a cut is made in the abdomen to explore or remove scar tissue. Surgeons may also cut nerves in the pelvis to help with endometriosis pain.

If you suspect you may have endometriosis, talk to your doctor or gynecologist. They can review your medical history, discuss your symptoms with you, and help with diagnosis and potential treatment. ■



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