



THE FANNY DIARIES

# AFTER SURGERY FOLLOW UP QUESTIONS

All the things I wish I had known and asked in my  
follow up appointment after my Laparoscopy Surgery.  
If Endometriosis WAS found.

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# HELLO BABES!

My name is Sarah, I was diagnosed with Endometriosis through Laparoscopy Surgery in September 2020. I really struggled with finding what to expect from the surgery journey, especially what to ask in my follow up appointment, so I created my own little free packing surgery E-book to help others. I was really unprepared for it all, I had no clue what to ask and it was only after research online for months after did I realise what I should have been informed about and what I should have been asking.

I hate the thought of anyone else being in the same position so I hope this helps. If you find there is something which I haven't covered and would be useful to mention please drop me a message so I can add it in.

I wish you all the best with your follow up appointment, I am always here to answer any questions you may have and help in any way that I can.

Love yaaaa,

*Sarah Victoria*  
*xoxo*



# JUST A QUICK NOTE.

Thank you so much for downloading this little E-book.

I am so sorry that you are going through all of this, it is such a confusing and isolating journey and I hope your surgery and follow up brings you all the clarity and answers that you have been searching for (probably for a very long time).



Just a super quick FYI- Everything in this little E-Book is all based on my own personal experience of going through the Laparoscopy Surgery journey and Follow up appointment from a patient perspective. This is all about what I learnt and what I think could be helpful to know and ask. I am not in any way and never claim to be a medical professional and I will never give medical advice. This E-Book is not to be confused for medical advice. Please always speak to your doctor and medical professionals regarding any concerns that you have.



*Love ya!*



# WELCOME TO THE ENDO CLUB!



“The worst club with the best members”  
- Miranda Burns



WHEN I FIRST GOT MY  
DIAGNOSIS FRESH OUT OF  
SURGERY.



WAITING FOR SURGERY NOT  
KNOWING MY LIFE WOULD  
SOON CHANGE FOREVER.

The most unflattering  
photos, I wasn't going  
to post these but what  
else can I do? hahaha!

It is such a bitter sweet moment getting welcomed to the Endometriosis club. You are relieved because your pain and symptoms are finally validated. You finally have an explanation and a name for your symptoms. This is most likely after years of being fobbed off, just offered the pill, and told that your pain is all in your head. Your gut feeling was right, no matter how much you started to doubt yourself. You knew deep down something was wrong and you finally have proof. However, now is a new journey. A journey of more challenges, more advocating for yourself, uncertainty, confusion, loneliness and grieving of your old self.

It is so important to allow yourself to feel every single emotion. I cried in bed for weeks after my surgery and my diagnosis. This was followed by months of confusion, loss, grief and loneliness that no one would begin to understand. You are never alone though babes, I am cheering you on every step of the way. Hang on in there, you are far more fabulous than you think, and it does get easier. I promise. Sx

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# UPON DIAGNOSIS

Not everyone experiences all of this but this was my personal experience.

## WHAT NO ONE TELLS YOU...

Rocking the fresh from anesthesia look with dry lips and dry skin but always keeping it real over here hahah!



1

### You Receive Your Diagnosis

You receive your diagnosis and you feel so much happiness. At this point you forget that it's a lifelong chronic illness and you are just so happy to have a name, a diagnosis, and a reason as to why you have been in pain for years. You finally have clarification that you are not crazy, that this wasn't all in your head and that your gut instinct wasn't off. That despite everything and all the dismissals, you were right. It's a huge, emotional I knew it moment and the validation just means so much. It's a feeling that can not be described unless you experience it yourself.



2

### Emotions And Grief

Next comes the most unusual wave of emotions and the grief. The confusion, the why did this happen? the what do I do now? what do I have? the will I be ok? Is this forever? The anger that you have been let down for years and fought to be listened to yet no one would take you seriously. The blaming of yourself, should I have tried harder? could I have done more?

3

### The Need To Research

You then suddenly get the urge to research every single thing, to find all the information you possibly can about the condition you are just newly diagnosed with. This is where you will most likely find contradicting or vague information which can leave you even more confused than before you started.



4

### The Isolation

You don't want to see anyone or do anything. You just feel numb. I couldn't stop crying at this point. Everything was just so terrifying and no one I knew had been through it.



5

### The more medical appointments

I genuinely thought after my surgery that would be it for ever, never to be mentioned again. I didn't realise there would be further tests, or more appointments, that people go on to have multiple surgeries. I wasn't expecting any of it and I found it so hard to realise that it still isn't over and might not be for a long time, despite a diagnosis.



6

### Are these feelings forever?

When will I start feeling better? Is this it for life? I was so low, nothing mattered anymore, I still had no emotions and I was still just numb.



7

### Everything will be ok

This is me sending you a huge virtual hug and I am telling you that you will be ok, I promise. It's such a scary and uncertain time with every single emotion but it does get that bit easier. This will be with you forever but I wish someone would have told me this, I wish I had seen something to say it gets easier and I that I will be ok because I desperately needed some hope. Sending you all the love in the world you strong Fanny Queen! Always here if you need anything. Love ya x



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# SOME REMINDERS FOR YOU, YOU BEAUTIFUL BABE.

- 1 You didn't cause this.
- 2 This is not your fault.
- 3 You are not lazy, you are tired.
- 4 Resting doesn't make you lazy, it's essential.
- 5 You still deserved to be loved.
- 6 You are still worthy.
- 7 It's ok to ask for help, it doesn't make you any less of a person.
- 8 You are enough.
- 9 You are not an inconvenience, a failure or a burden.
- 10 You are so much more than your Endometriosis.





Help!

**What is Endometriosis?**

YOU DESERVE  
ALL THE  
GOOD THINGS

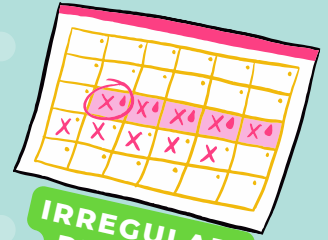




**HEAVY PERIODS**



**INFERTILITY**



**IRREGULAR PERIODS**



*I'm tired...*

**FATIGUE**



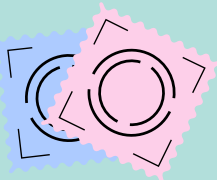
**PAINFUL BOWEL MOVEMENTS**



**CHIN HAIRS**



**PAINFUL PERIODS**



**PAINFUL SEX**

# SOME COMMON

# SYMPTOMS OF

# ENDOMETRIOSIS

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**LEG PAIN**



**CONSTIPATION**



**CRAMPS**



**PAINFUL URINATION**



**BLOATING**



**LOWER BACK PAIN**



**NAUSEA**



**DIARRHOEA**





# COMMON MYTHS ABOUT ENDOMETRIOSIS

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**ENDOMETRIOSIS IS THE ENDOMETRIUM.**



Endometriosis is Endometrial **LIKE** cells/tissue growing outside the uterine cavity. It is **NOT** the endometrium.



**A HYSTERECTOMY IS A CURE FOR ENDOMETRIOSIS.**



There is currently no cure for Endometriosis, including a hysterectomy.



**HORMONES STOP THE GROWTH OF ENDOMETRIOSIS.**



Hormones can potentially suppress some of the symptoms of Endometriosis but they do **NOT** stop the growth.



**ENDOMETRIOSIS IS ONLY FOUND IN THE UTERUS.**



Endometriosis is an all over body disease and It has been found on every organ within the body.



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# INFORMATION ON ENDOMETRIOSIS

**Endometriosis Definition** - "Endometriosis is a systematic inflammatory disease characterised by the presence of endometrial-like tissue found in extrauterine sites" - (Kennedy S. et al., 2005; Klemmt et al., 2018; Saunders et al., 2021).

If the same thing which happened to me, happened to you then this Endo E-Book is for you. I woke up from surgery, was told I had Endometriosis and then kicked out to fend for myself without so much as a piece of information, or an explanation of what it is, It really is awful.

There is a lot to process about Endometriosis, especially when you are newly diagnosed. Where do you even start? What is accurate and what isn't? Why is it all in such complicated scientific language? I have been there.

I'm so conscious not to overload this follow up appointment E-Book with Endometriosis information making it super overwhelming so I created a separate one.

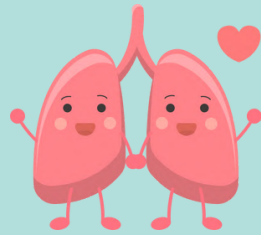


When you are feeling strong enough, you can find it for free on the Fanny Diaries Website. (It is the next one I am editing so it should be available super soon)

# EXTRA PELVIC ENDOMETRIOSIS

Extra Pelvic Endometriosis is where Endometriosis is found elsewhere in the body, outside of the Uterine Cavity.

Extra Pelvic Endometriosis is possible and it is not as rare as we are led to believe. It is just misdiagnosed and under diagnosed .



Extra Pelvic Endometriosis includes - Bowel, Bladder/Urinary, Thoracic etc.

For more information, you can find the free Extra Pelvic Endometriosis E-Book on The Fanny Diaries Website!



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# DIFFERENT SURGICAL TECHNIQUES FOR REMOVING ENDOMETRIOSIS.



You may or may not be aware of the two different surgical techniques for removing Endometriosis - Excision and Ablation. I was not aware of this throughout my entire surgery journey, I was never informed and I actually found out through Instagram, it wasn't even on the UK's leading Endometriosis Charity page. It's super important to know as they both have different outcomes and that way people are more informed and can make the best decisions for themselves and for their health.

My incisions - I had 3 mainly in one area however, it can vary per person and per surgeon / where they look and what they do as to how many incisions you have and whereabouts they are.

## EXCISION

Excision involves cutting out the entire Endometriosis lesion at the root.

Excision surgery allows for a biopsy to be taken and sent for pathological testing for an accurate diagnosis of Endometriosis.

VS

## ABLATION

Ablation is a superficial treatment which involves burning the top of the lesions to remove them, usually leaving the root behind. It is widely practiced by OBGYNs around the world. However, it is not possible to take a biopsy through ablation.

## DAVINCI ROBOT

The robot is the machine that the surgeon uses to perform robot assisted surgery. This surgery packing tips e-book and top tips will still be the same regardless if the robot is used or not.

For more information, download the Excision V Ablation E-Book on The Fanny Diaries.

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# ENDOMETRIOSIS SURGICAL TECHNIQUES BRIEFLY EXPLAINED.

ABLATION BURNS THE TOP OF THE ENDOMETRIOSIS LESION, DOES NOT REMOVE THE LESIONS FROM THE ROOTS.



## ABLATION

This plant & roots represent Endometriosis within the body.

The fire over the plant represents Ablation tools burning the top of the Endometriosis

This patch of soil with the roots still intact represents the aftermath of Ablation.

It signifies the surface of the Endometriosis being removed, leaving the roots behind and still intact.

## EXCISION



EXCISION PHYSICALLY CUTS OUT ENDOMETRIOSIS LESIONS AT THE ROOTS.

This plant & roots represent Endometriosis within the body.

The shovel represents the Endometriosis being Excised (Cut out from the roots)

This empty soil patch represents the aftermath of excision surgery. The Endometriosis has been excised from the roots.

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# Pros & Cons

## EXCISION



IT PHYSICALLY CUTS OUT ENDOMETRIOSIS LESIONS AT THE ROOTS.

## ABLATION



IT BURNS THE TOP OF THE ENDOMETRIOSIS LESION.

### Pros

- Removes Endometriosis from the root, ensuring total removal of the Endometriosis lesion found.
- Removes deeply infiltrated Endometriosis (DIE).
- Specialist Surgeons utilising excision routinely report rates of long-term relief in 75-85% of patients.
- Lower rates of recurrence.
- Can obtain a biopsy for pathological testing.

### Cons

- Not easily accessible, as expert Excision Specialists are super rare.
- Extremely expensive, not many insurances will cover it.
- A lack of trained Endometriosis Specialist's in the world.
- Longer recovery time as more invasive.
- Recurrence can still occur.

### Pros

- Shorter recovery time as less invasive.
- More accessible, more trained surgeons.
- Less expensive, insurance is more likely to cover it.
- Can possibly provide short term relief.

### Cons

- Burning tissue increases the risk of scar tissue which can increase the risk of potential damage to other organs and tissue.
- Not obtaining a biopsy for pathological diagnosis. Therefore, just relying on the surgeons naked eye for an accurate diagnosis.
- Does not remove the Endometriosis lesions from the roots.
- Higher recurrence rates.

**I AM STRONG  
I AM CAPABLE  
I AM RESILIENT**



what to ask?

In Your Follow Up Appointment...



# USEFUL FOLLOW UP APPOINTMENT TIPS



OR



Take a notepad/ print out/ something to write notes on/in. You can print the pages of questions in this E-book.



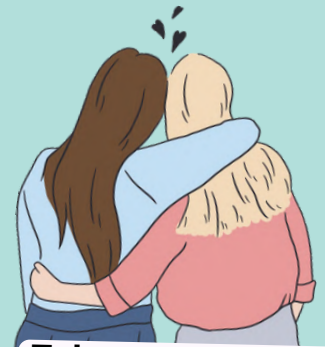
ask if you are able to voice record the conversation.



Try and remain calm (easier said than done) it's a lot to take in and process all at once. It can be very overwhelming but be gentle with yourself.



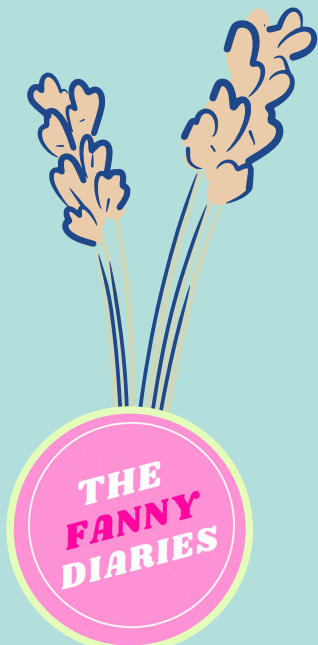
Start the process of accessing your surgery notes so you can read it all in your own time when you feel strong enough.



Take someone you trust with you if possible and if you feel comfortable to do so.



Treat yourself to something fun to do after or go grab your favourite snack and have a movie afternoon. Some self care! I always get myself some chocolate cake and strawberries.

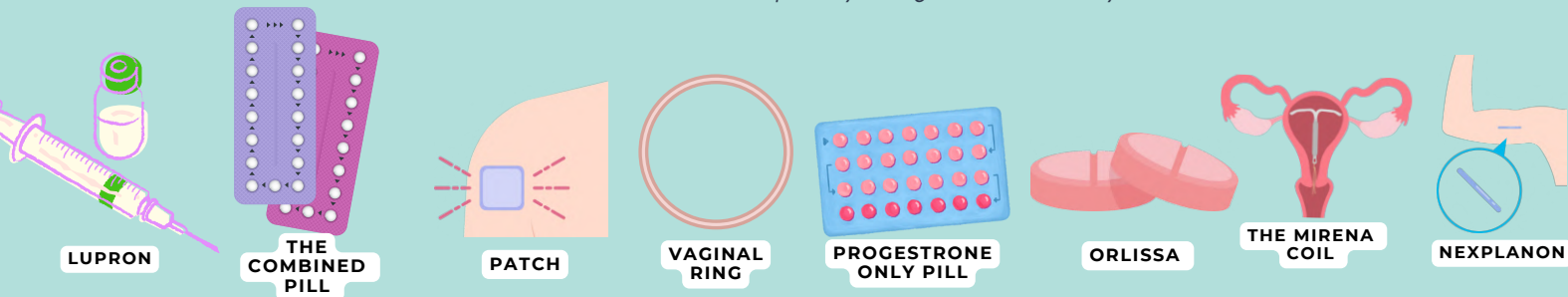




# TREATMENT OPTIONS

Medical treatment options for Endometriosis aim to reduce the severity of symptoms and improve quality of life. The majority of the medical treatment options available (are some form of hormonal with the) aim to suppress ovulation and periods. However, it is important to note that suppressing ovulation and periods does NOT suppress Endometriosis.

*Some medical "treatment" options you might be offered may include...*



- Hormone contraceptive Pill - Combined or Progesterone only Pill.
- Other combined contraception - The patch, Vaginal ring etc.
- Progestins - The Mirena Coil, Visanne, Depo Provera, Dienogest, nexplanon etc.
- GnRH Drugs - Lupron, Orlistta, Zoladex, Prostag etc. (These drugs induce a medical menopause)
- Advised to or choose to take nothing.

Endometriosis is not a one size fits all which is why it can become quite complex finding a medical treatment that may work for you. What works for you might not work for someone else and vice versa. It's so important that you decide (with your doctor) what is best for your specific case and that you also understand all the side affects involved whilst taking medication. Some people have positive experiences with certain medications and some people have the worst side affects. No one should judge you for doing what you feel is best for you and your health. There is no right or wrong way to try and manage your Endometriosis symptoms.

There will be an all about Endometriosis E-book available to download soon which has more information about treatment options. Or I am currently working on an in depth Treatment option E-Book which will be covering everything from each individual medication to side affects etc.



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# FOLLOW UP APPOINTMENT CHECK LIST.

- Found out exactly what was done.
- Reported any new symptoms since surgery.
- Asked all the questions you needed to ask.
- Understand the treatment plan, should you be put on any treatment options.
- Discussed when your next appointment is/ where you go from here.
- Started the process to access a copy of your surgical notes/ photos or understand how to access them.
- Know how to contact should you have any issues whilst still recovering from surgery.
- Know when you can go back to regular activities/sports etc.
- Addressed any other concerns.



# QUESTIONS TO ASK YOUR ENDOMETRIOSIS SURGEON



1

- 1 Where did you find Endometriosis?
- 2 Did you excise, ablate or use both techniques to remove my Endometriosis?
- 3 Was there any Endometriosis left behind? or any you couldn't remove? If so where and why was it left?
- 4 Did you check for Endometriosis elsewhere in the body/other organs? If so where?
- 5 Did you excise all tissue that looked abnormal or just tissue that looked like Endometriosis?
- 6 Did you take any biopsy's of tissue and send them off to be tested/ If so what are the results?
- 7 What stage Endometriosis do I have?
- 8 Did you find any Adhesions/ Fibroids or Polyps?
- 9 Where there any signs of Adenomyosis?
- 10 Did you check that my Ovaries are working correctly and everything else looks ok?
- 11 Did you do any other tests during my surgery? (Such as Hysteroscopy)
- 12 Did you take photos or videos during surgery? If so how would I access a copy?
- 13 (Should pictures be present) Can you please explain what is in the pictures?
- 14 How would I gain access to all of my surgery notes/ get a hardcopy of them?



# QUESTIONS TO ASK YOUR ENDOMETRIOSIS SURGEON



## 2

- 15 Did you use an Adhesion Barrier Prevention? If so which one?
- 16 Were there any complications during my surgery?
- 17 What happens now moving forward?
- 18 What treatment options do you think would be suitable and why?
- 19 Is there a specialist that you are able to refer me to... (this is a helpful question if Endometriosis has not been removed at all, some has been left behind in certain places or if you have extra pelvic Endometriosis.
- 20 Who should I contact if I have any future post op complications?
- 21 Who should I see if my endometriosis symptoms continue?
- 22 How would I get a referral to a pain management clinic?
- 23 How would I get referred to a Pelvic Therapist if this is something I would like to explore?
- 24 When can I return to work/daily activities/exercise/ sex etc?
- 25 Is there anything else that I need to know about my surgery?



# Questions to ask at your follow up appointment.



1 Where did you find Endometriosis?

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2 Did you excise, ablate or use both techniques to remove my Endometriosis?

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3 Was there any Endometriosis left behind? or any you couldn't remove?  
If so where and why was it left?

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4 Did you check for Endometriosis elsewhere in the body/other organs?  
If so where?

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# Questions to ask at your follow up appointment.

2

5 Did you excise all tissue that looked abnormal or just tissue that looked like Endometriosis?

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6 Did you take any biopsy's of tissue and send them off to be tested/ if so what are the results?

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7 What stage Endometriosis do I have?

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8 Did you find any Adhesions/ Fibroids or Polyps?

---

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9 Where there any signs of Adenomyosis?

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# Questions to ask at your follow up appointment.

3

10 Did you check that my Ovaries are working correctly and everything else looks ok?

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11 Did you do any other tests during my surgery? (For example - a Hysteroscopy)

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12 Did you take photos or videos during surgery? If so how would I access a copy?

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13 (Should pictures be present) Can you please explain what is in the pictures?

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15 Did you use an Adhesion Barrier Prevention? If so which one?

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# Questions to ask at your follow up appointment.

4

16 Were there any complications during my surgery?

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17 What happens now moving forward?

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18 What treatment options do you think would be suitable and why?

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19 Is there a specialist that you are able to refer me to... (this is a helpful question if Endometriosis has not been removed at all, some has been left behind in certain places or if you have extra pelvic Endometriosis.)

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# Questions to ask at your follow up appointment.

5

20 Who should I contact if I have any future post-op complications?

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21 Who should I see if my Endometriosis symptoms continue?

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22 How would I get a referral to a pain management clinic?

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23 How would I get referred to a Pelvic Therapist if this is something I would like to explore?

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24 When can I return to work/daily activities/exercise/ sex etc?

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25 Is there anything else that I need to know about my surgery?

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# ANY ADDITIONAL NOTES

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# USEFUL PRODUCTS



## BeYou Patches

£7.99+

use code  
FANNYDIARIES1  
for 10% off

THESE MAGICAL PATCHES ARE A NATURAL ALTERNATIVE TO PAINKILLERS. I HONESTLY COULD NOT BE WITHOUT THEM. IT IS A TRANS-DERMAL PATCH WHICH RELEASES STEAM DISTILLED MENTHOL AND EUCALYPTUS OILS OVER 12 HOURS.

[www.beyouonline.co.uk](http://www.beyouonline.co.uk)



## Chelsea Peers Pyjamas

£20+

THESE ARE THE SOFTEST AND MOST COMFIEST PJS WITH THE BEST WAISTBAND FOR THOSE BLOATED DAYS. THEY COME IN ALL DIFFERENT STYLES AND SIZES, I AM BUILDING UP QUITE THE COLLECTION SO I THOUGHT I WOULD SHOUT ABOUT THEM! I NEVER PAY FULL PRICE THOUGH, ALWAYS GRAB THEM IN THE SALE ON ASOS.

[www.asos.com/](http://www.asos.com/) [www.chelseapeersnyc.com](http://www.chelseapeersnyc.com)

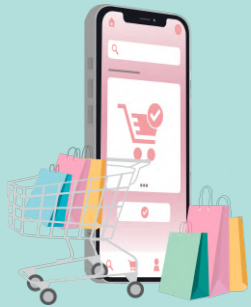


## Plug In Heating Pad

£10.00+

A PLUG IN HEATING PAD IS HONESTLY THE BEST THING EVER! IT GETS ME THROUGH SOMETIMES AND IS FABULOUS IN THE ENGLISH WINTER!! THEY COME IN ALL DIFFERENT SIZES AND I JUST GET MINE FROM AMAZON. I HAVE SOME LINKED IN MY AMAZON SHOP IF YOU ARE EVER STUCK FOR WHICH ONE.

[www.amazon.com/](http://www.amazon.com/) [.co.uk](http://.co.uk)



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THESE ARE THE MOST AMAZING PADS, LIKE A MATTRESS FOR YOUR FANNY. THEY ARE ORGANIC COTTON AND HAVE OTHER AMAZING PRODUCTS. AVAILABLE ONLINE OR IN MOST SUPERMARKETS.

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MY OBI IS A FAB LITTLE PORTABLE HEATING/VIBRATING BELT FOR ON THE GO! I GENUINELY LOVE IT.

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## My Oovi

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SO MANY PEOPLE RAVE ABOUT THIS ONLINE, I AM YET TO TRY IT BUT I THOUGHT IT MIGHT BE HELPFUL TO MENTION HERE. LET ME KNOW IF YOU TRY IT AND IF IT'S WORTH ME INVESTING TO GET ONE.

[www.myoovi.co.uk](http://www.myoovi.co.uk)



\*\*Prices may be different at the time of purchase from when this was put together.



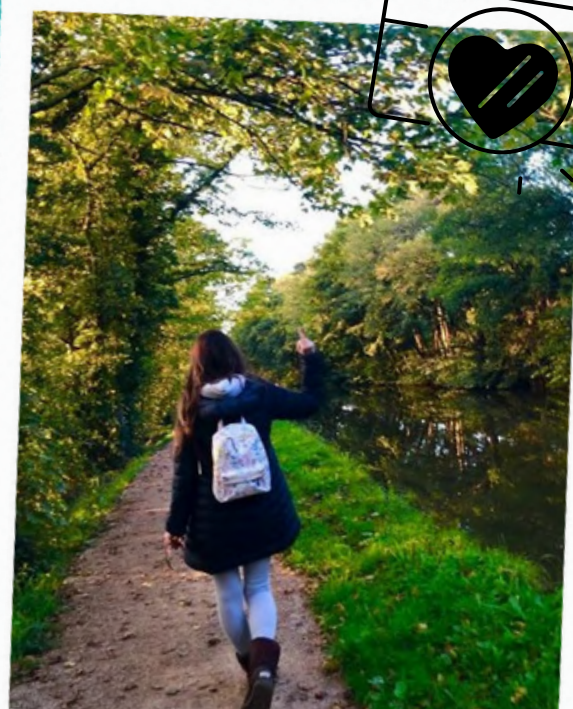
# COME JOIN THE FANNY FAMILY

I hope you stick around!



THE FANNY DIARIES

WHEN I FIRST STARTED THE FANNY DIARIES I DRAGGED MY SISTER TO A FIELD IN NOVEMBER (IN JUST MY PANTS AND IT WAS FREEZING) TO TAKE SOME PHOTOS FOR THE WEBSITE- LOL



ON MY FIRST WALK AFTER MY SURGERY - A BIG MIDDLE FINGER TO MY NEW ENDO DIAGNOSIS.



A STANDARD CASUAL ENDO FLARE DAY WITH MY LIFE SAVER MYOBI BELT.

Since receiving my Endometriosis diagnosis and going through the surgery journey, my life has dramatically changed. I was so isolated and alone in all my feelings, not knowing what to do or who to talk to. I knew I couldn't be the only one so I began to channel everything into creating The Fanny Diaries and I can't even begin to explain how much joy it has brought me. Starting to build this beautiful little online community, it has kept me going on some of my darkest days. I have had the pleasure of speaking to and meeting so many fabulous people and I have watched people connect and create beautiful friendships. I am so grateful to each individual person and I can only dream that this continues to grow into something wonderful. I hope you come and join, I would love to meet you! x



@THEFANNYDIARIES



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THE FANNY DIARIES



SARAH@FANNYDIARIES.COM

"Surround yourself with supportive people & fight for your fanny" 

# SOURCES

I pride myself on thorough research and putting out only accurate information from Proper Endometriosis Specialists. However, I am still on the learning journey myself and occasionally I may get something wrong. If you feel like something is wrong please drop me an email so I can rectify it ASAP. Love ya x

<https://centerforendo.com/endometriosis-understanding-a-complex-disease>

[www.fannydiaries.com](http://www.fannydiaries.com)

[www.nhs.uk](http://www.nhs.uk)

<https://centerforendo.com/who-is-sampson-and-what-does-he-have-to-do-with-endometriosis>

Bulun, S. E., Monsavais, D., Pavone, M. E., Dyson, M., Xue, Q., Attar, E., Tokunaga, H., & Su, E. J. (2012). Role of Estrogen Receptor-B in Endometriosis. *Seminars in Reproductive Medicine*, 30(1), 39-45. <https://doi.org/10.1055/s-0031-1299596>

Guidone, H. C. (2020). The Womb Wanders Not: Enhancing Endometriosis Education in a Culture of Menstrual Misinformation. In: Bobel, C., Winkler, I. T., Fahs, B., Hasson, K. A., Kissling, E. A., Roberts, T. A. (eds) *The Palgrave Handbook of Critical Menstruation Studies*. Palgrave Macmillan, Singapore. [https://doi.org/10.1007/978-981-15-0614-7\\_22](https://doi.org/10.1007/978-981-15-0614-7_22)

<https://www.healthline.com/health/endometriosis>  
Medically reviewed by Valinda Riggins Nwadike, MD, MPH —  
Written by Abdul Wadood Mohamed— Updated on July 2, 2019

<https://www.nhs.uk/conditions/endometriosis/>

<https://endometriosis.net/clinical/excision-ablation/>

<https://www.nhs.uk/conditions/laparoscopy/>

<https://www.sciencedirect.com/science/article/abs/pii/S1047279797000173?via%3Dihub>

References: Falcone T, Wilson JR. Surgical management of endometriosis: excision or ablation. *J Minim Invasive Gynecol*. 2014 Nov-Dec;21(6):969. Yeung P Jr. The laparoscopic management of endometriosis in patients with pelvic pain. *Obstet Gynecol Clin North Am*. 2014 Sep;41(3):371-83.

