

What is Endometriosis?

It is estimated that around 200 million people around the World has Endometriosis. It does not discriminate All people of all races can be affected



Endometriosis is a chronic inflammatory condition where cells that are similar to those that line the womb are found elsewhere in the body.

Common Symptoms present in Endometriosis can be;

- Dysmenorrhea (pain during menstruation)
- Dyspareunia (painful intercourse)
- Dyschezia (difficult or painful defecation)
- Dysuria (painful urination)
- Cyclic and chronic pelvic pain
- Menstrual disorders
- Infertility

These symptoms are not exclusive, and you may have just one or a mixture of many. They may also overlap with many other conditions, making diagnosis a hard and slow process.

Who are we?

A registered charity 1186203 set up to help people on the South Coast of the UK and beyond who are going through the diagnosis stages or have been diagnosed with endo or adeno. As well as their support systems.

What we do....



Raise awareness of endo & adeno on a local basis

Provide people with a support system both online and face to face



Raise funds to educate local employers to allow them to best support their employees with "menstrual health conditions"

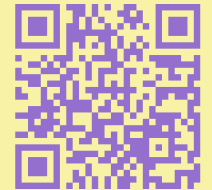
Raise funds for much needed research into the condition and advertising new research projects



ENDOMETRIOSIS
SOUTH COAST

Endometriosis & Adenomyosis

Contact us



@endosouthcoast



Endometriosis South Coast Support Group



@Endometriosis South Coast



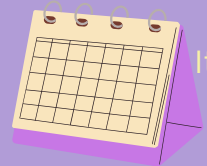
endometriosisouthcoast.com

There is NO cure for Endo. Hormone contraception, Prostaglandin synthase inhibitors, Zoladex, Orlistat, eating fruit and veg, doing yoga, having a baby or having a hysterectomy will NOT cure Endo. And are not always effective treatments.



Sometimes, depending on how deep the Endometriosis is and if a specialist is reading the images, Endometriosis can be detected from an MRI Scan or an Ultrasound. However, this is rare, so do not be alarmed if it is not showing on any of your tests. Most general gynaecologists are not trained to read imaging and detect Endometriosis.

The only definitive way to diagnose Endo is through Laparoscopic surgery where biopsies can be taken and sent to a lab for further testing. A Laparoscopy can provide information about the extent and the location of Endometriosis.

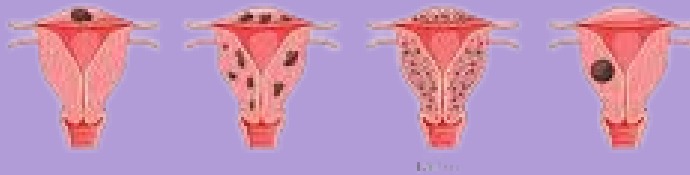


It takes on average
8 Years to diagnose Endo

Endo is listed by the NHS as one of the top 20 most painful conditions

What is Adenomyosis?

Adenomyosis occurs when the tissue that normally lines the uterus (endometrium) grows into the muscular wall of the uterus (myometrium). This tissue continues to act normally, thickening, breaking down and bleeding, which results in an enlarged and/or misshapen uterus as well as a distorted vasculature system.



Deep Infiltrating Endo can cause extension from the outside (abdominal-pelvic cavity, peritoneum) into the thickness of the uterine wall (myometrium). This happens frequently in cases of advanced deep endometriosis when endometriosis nodules infiltrate the cervix and uterine body.

Adeno is usually diagnosed after a hysterectomy and lab testing of the uterus.

However, ultrasound and MRI, Technology and training are improving, and at least a working diagnosis can be made without surgery.

Some symptoms present in Adeno are;

- Dysmenorrhea (pain during menstruation)
- Dyspareunia (painful intercourse)
- Blood clots during menstruation
- Leg pain
- Heaviness/pressure in the pelvis
- Menstrual disorders
- Infertility
- Many symptoms overlap with Endometriosis symptoms

There are a variety of prescription drugs for Adenomyosis to reduce the pain and heavy bleeding non surgically. Oral contraceptives, various progesterone preparations, and IUD's can be used.

Surgical treatment for focal adeno/adenomyoma is deep laparoscopic excision of the affected tissue. This can be used to preserve fertility.

Hysterectomy should be the last option for patients with diffuse Adenomyosis. This is not a cure for patients with Endometriosis and a suspicion of Endometriosis.

Severe pelvic pain can sometimes be alleviated with laparoscopic resection of the presacral nerve.