

# Endometriosis: How is it treated?



# Surgical treatment

Surgical treatment for endometriosis involves a laparoscopy, a type of keyhole surgery used to both diagnose and treat the condition.

## What happens during a laparoscopy?

Laparoscopy is done under general anaesthetic, which means you will be asleep and won't feel any pain during the operation. The surgeon makes a small cut near your belly button and inserts a tiny camera to look inside your abdomen. A small amount of gas is used to gently create space so the surgeon can see clearly.<sup>1</sup>

Sometimes a few more small cuts are made to allow other instruments to be used. Another tool may also be used to gently move the womb so the surgeon can see around it.<sup>1</sup>

During the surgery, the surgeon may remove endometriosis tissue. They may also separate organs that have become stuck together due to scar tissue (adhesions) and remove cysts (endometriomas) from the ovaries.

Surgery may sometimes be required to remove endometriosis from other areas, such as the bladder, bowel, or chest.

At the end of the procedure, the gas is released and the small cuts are closed with dissolvable stitches.<sup>1</sup>

<sup>1</sup> [Laparoscopy, Nuffield Health, 2026](#)



## Surgical techniques: excision or ablation?

Surgical treatment may involve excision, where endometriosis tissue is cut out, ablation, where the tissue is destroyed using heat, or a combination of both.

The surgeon decides which technique to use based on the size and location of the endometriosis.

When both options are suitable, excision is often preferred so the removed tissue can be examined under a microscope to confirm the diagnosis (biopsy).<sup>2</sup>

## What happens after a laparoscopy?

Sometimes you will be able to go home the same day after a laparoscopy, and sometimes you may need to stay overnight. Your healthcare team will let you know what to expect.

Most people make a full recovery within 3 - 4 weeks and are able to return to their usual activities.<sup>1</sup>

The exact recovery time can vary depending on the activities you normally do. Tasks that involve heavy lifting, long periods of time on your feet, or physical effort may take longer to resume than lighter, less active tasks.<sup>1</sup>

<sup>1</sup> [Laparoscopy, Nuffield Health, 2026.](#)

<sup>2</sup> [The Women's Royal Hospital Victoria Australia, Laparoscopy and Endometriosis, 2026.](#)

## How effective is laparoscopy for endometriosis?

Laparoscopy is an effective treatment for many people with endometriosis. Research shows that it can reduce pain, improve quality of life, and, for some people, increase the chance of becoming pregnant.<sup>3,4</sup>

Compared with open surgery, laparoscopy usually involves a shorter hospital stay, less blood loss, and a faster recovery, with fewer complications.<sup>5</sup>

It's important to remember that while laparoscopy can be helpful, results vary from person to person.

Sometimes, endometriosis can return after surgery, and you may need additional surgeries if your symptoms come back or if new adhesions form.

Your healthcare team can help you understand how likely surgery is to help in your specific situation.



3. [Yeung, Shwayder & Pasic. Laparoscopic management of endometriosis: comprehensive review of best evidence. 2009.](#)

4. [EndoNews. Laparoscopy Benefits Women With Endometriosis Across All Stages. 2025.](#)

5. [Li et al. Clinical effects of laparoscopic surgery for the treatment of endometriosis and endometriosis-fertility: A retrospective study of 226 cases. 2023.](#)

# Getting ready for a laparoscopy

Once your laparoscopy date is set, planning ahead can make the experience feel more manageable and support your recovery afterward.



Pack a small overnight bag, just in case your surgery or recovery takes a little longer than planned.



Eating well in the days leading up to surgery can help your body recover.<sup>1</sup>



It's normal to feel nervous or anxious, so try to give yourself extra time and be kind to yourself.



Prepare your home so it's comfortable when you return: tidy your living space, have easy-to-heat meals ready, and make sure your fridge is stocked.

<sup>1</sup> [Laparoscopy, Nuffield Health, 2026](#)

# What to expect immediately after surgery

It's normal to feel some abdominal pain and shoulder discomfort from the gas used during the laparoscopy. Gentle movement, using a warm compress, and staying hydrated can help. Pain medication will also be provided by the hospital to keep you comfortable.<sup>1</sup>

You'll be encouraged to pass urine before going home.

Ask your healthcare team about bowel care, including if it's safe to use laxatives.

You'll usually have between one and five small incisions on your abdomen, covered with dressings.

Your healthcare team will advise on when you can remove the dressings, when you can shower, and how to look after your incisions.<sup>1</sup>

You may notice light vaginal bleeding or spotting for a few days due to the tools used during the procedure.<sup>1</sup>

There is a small risk of blood clots in the legs or lungs after surgery. Moving around, doing simple leg exercises, and sometimes using compression stockings or injections can help reduce this risk.<sup>1</sup>

Before leaving the hospital (being discharged), make sure you understand your pain medications, wound care instructions, emergency hospital contact details, and follow-up appointment.

<sup>1</sup> [Laparoscopy, Nuffield Health, 2026](#)

# What to expect after being discharged

- ✓ Your body is using a lot of energy to heal, so feeling tired is common. Give yourself time to rest, especially in the first few days.<sup>1</sup>
- ✓ Have someone with you for the first 24 - 48 hours for safety and support.
- ✓ You will be able to wear your normal clothes after a laparoscopy, but many people prefer to wear looser-fitting clothes.<sup>1</sup>
- ✓ Gentle walking can help to reduce gas pain and prevent stiffness.
- ✓ Your healthcare team will advise you when it is safe to resume sexual activity, but it's also important that you feel ready.<sup>1</sup>

## Remember

Recovery looks different for everyone. This guidance is not a substitute for medical advice.

<sup>1</sup>[Laparoscopy, Nuffield Health, 2026](#)

# Pain management

As pain is a common symptom of endometriosis, effective pain management can help relieve these symptoms.

## Types of pain medications

Common types of pain medications include:

- Paracetamol
- NSAIDs such as ibuprofen, naproxen, or mefenamic acid
- Codeine-based painkillers
- Pain modifiers such as amitriptyline

These medications can have side effects. Some may cause dependence, especially if taken for a long time. If your pain continues or your symptoms don't improve, speak with your GP, healthcare team, or endometriosis specialist.

Some hospitals have clinics for people with long-term (chronic) pain. Ask your GP, healthcare team, or endometriosis specialist about how to be referred.

## Other types of pain management

### TENS (Transcutaneous Electrical Nerve Stimulation)

A TENS machine uses gentle electrical pulses on your skin to help reduce pain by blocking pain signals or encouraging your body to make natural pain-fighting chemicals called endorphins.

Always check with your GP, healthcare team, or endometriosis specialist before using a TENS machine, as it isn't suitable for people who are pregnant or have a heart condition.

### Physiotherapy

A physiotherapist can create a personalised programme of exercises and stretches to help reduce pain, strengthen your pelvic floor, and improve flexibility.

Physiotherapy is available privately and through the NHS. In some areas, you can refer yourself through an NHS self-referral service. Ask your GP, healthcare team, or endometriosis specialist for more information.

### Heat

Applying a warm compress or heating pad, or having a warm bath can help relax your muscles and ease abdominal or pelvic pain. Avoid putting heat directly on one area to prevent skin irritation or burns.

Deciding on the right pain management depends on many factors, and you will need to speak with your GP, healthcare team, or endometriosis specialist to find what works for you.

# Hormonal treatment

Hormonal treatments are commonly recommended to manage symptoms associated with endometriosis by reducing or stopping periods.

## Types of hormonal treatments

Common types of hormonal treatment include:

- Combined oral contraceptive pill
- Progestogen-only pills, such as desogestrel, norethisterone, or dienogest
- Intrauterine System (IUS), known as “the coil”
- GnRH analogues

These medications can have side effects. If your pain continues or your symptoms don't improve, speak with your GP, healthcare team, or endometriosis specialist.

Deciding on the right hormonal treatment depends on many factors, and you will need to speak with your GP, healthcare team, or endometriosis specialist to find what works for you.

# Alternative treatment options

Non-surgical and non-medical treatment options can also help to reduce symptoms and improve your quality of life.

For example:

- Diet and nutrition
- Mental health support
- Physical exercise
- Sleep hygiene and rest

Some people also use complementary therapies to manage their symptoms such as acupuncture, osteopathy, homeopathy, aromatherapy, meditation, and massages.

We recommend speaking to your GP, healthcare team, or endometriosis specialist before implementing any alternative treatment options into your existing treatment plan.





# Reminder

Each person's treatment journey is individual to them, and what works for one person may not work for you.

The approach that is best for you will depend on different factors, such as your age, medical history, the severity of your symptoms, whether you plan to have children, and the potential risks of side effects and complications.

**This guidance is not a substitute for medical advice.**

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# We're here to support you



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



[admin@endometriosisouthcoast.com](mailto:admin@endometriosisouthcoast.com)



@endosouthcoast



@endometriosisouthcoast



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## Legal & Accessibility Notes

This resource is for educational purposes and should not replace medical advice. If you're concerned about symptoms, please consult a healthcare professional.

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