




Endometriosis Pain Treatment Landscape

Deciding which endometriosis treatment is right for you can feel overwhelming. The best treatment for you depends on your most bothersome symptoms, and can be different based on where you are on your endometriosis journey. While there is no cure for the disease, there are treatment options to manage your pain associated with endometriosis.¹ Each treatment has benefits and drawbacks. Understanding your medical and surgical management options will help you select the best option(s) to achieve your current treatment goals.²



Treatment Class	+ Description	i Benefits	! Risks
Medical Management			
Pain Relievers	<p>Nonsteroidal anti-inflammatory drugs (NSAIDs): A class of pain medicine that decreases the production of pain-producing chemicals (called prostaglandins), which can help to relieve the painful cramps associated with endometriosis^{2,3}</p> <p>Many are available as tablets taken by mouth</p>	<ul style="list-style-type: none"> • Many are available over-the-counter and can be easily obtained without a prescription³ • Can be combined with other medical therapies² 	<ul style="list-style-type: none"> • Potential skin reactions such as skin reddening, rash, or blisters^{3,4} • Upset stomach symptoms, and potential ulcers and bleeding in the gastrointestinal (GI) tract; more likely with regular use of NSAIDs²⁰ • Increased risk of heart attacks or stroke with higher doses and longer use of the NSAID²¹
Combined Hormonal contraceptives (Birth control)	<p>Using a combination of an estrogen and a progestin can control the menstrual cycle and reduce or stop menstrual bleeding⁵</p> <p>Many are available as tablets taken by mouth Also available as a vaginal ring or a skin patch</p>	<ul style="list-style-type: none"> • Can make your periods lighter, shorter, and can reduce endometriosis pain • Provide contraception • Work best in women who have pain during their period² 	<ul style="list-style-type: none"> • Headache, nausea, breast tenderness, irregular bleeding / spotting^{6, 22} • Rare; May increase risk of heart attacks, stroke, deep-vein blood clots in some women²
Progestins	<p>Medications containing a synthetic form of progesterone to decrease endometriosis pain and can reduce or stop menstrual bleeding⁷</p>	<ul style="list-style-type: none"> • Hormonal medication alternative for women who do not wish to or cannot take estrogens⁵ • Provide contraception • Can make your periods lighter, shorter, and can reduce endometriosis pain² 	<ul style="list-style-type: none"> • Progestins generally all have similar hormonal side effects related to metabolism and mood changes (headache, nausea, weight gain, breast tenderness, irregular bleeding). Individual reactions to progestins can differ depending on type⁷ • Endometriosis tissue may not always respond to progestins due to progesterone resistance⁸
	<p>Progestins are available in various forms carrying different types of progestin²:</p> <ul style="list-style-type: none"> • Progestin-only pills 		<p>Progestin-only pills</p> <ul style="list-style-type: none"> • Progestin hormone side effects as listed above⁹
	<ul style="list-style-type: none"> • Injection / shot (medroxyprogesterone acetate depot) 		<p>Injection / shot</p> <ul style="list-style-type: none"> • Associated with bone loss • Progestin hormone side effects as listed above⁷ • May take several months to return to a normal cycle after stopping an injectable progestin¹⁰
	<ul style="list-style-type: none"> • Intrauterine device (IUD) containing levonorgestrel • Implant: A small single rod releasing etonogestrel that is inserted just under the skin in the upper arm 		<p>IUD</p> <ul style="list-style-type: none"> • Irregular bleeding • IUD may fall out of the uterus partially or completely¹¹ <p>Implant</p> <ul style="list-style-type: none"> • Progestin hormone side effects as listed above¹²
GnRH antagonists	<p>GnRH antagonists dial estrogen levels down and the degree of estrogen reduction is dependent on dose¹³</p> <p>Available as tablets taken by mouth</p>	<ul style="list-style-type: none"> • Reduce endometriosis pain symptoms (painful periods, pelvic pain in between periods, and pain with sex); may stop your periods¹⁴ • Menstrual periods return within 1 month for most women after stopping the medication¹³ 	<ul style="list-style-type: none"> • Common side effects include mild to moderate hot flashes or night sweats, headache, nausea, difficulty sleeping, absence of periods, anxiety, joint pain, depression, and mood changes^{13,14} • Because this class of medication works by lowering estrogen, it can also cause bone loss¹⁴ • Can be used for a limited amount of time, up to 24 months • May change pattern of periods, making it hard to tell if pregnancy has occurred / if pregnant¹³

Treatment Class	 Description	 Benefits	 Risks
Medical Management			
GnRH agonists	<p>GnRH agonists first increase estrogen levels before completely blocking the production of estrogen, preventing ovulation and stopping menstrual flow¹⁵</p> <p>Available as a nasal spray or injection</p>	<ul style="list-style-type: none"> Reduce endometriosis pain and bleeding; may stop your periods¹⁷ 	<ul style="list-style-type: none"> Common side effects include hot flashes, vaginal dryness, decreased sex drive, difficulty sleeping, mood swings, and bone loss over time^{15,16} <ul style="list-style-type: none"> Side effects may be reduced or minimized with addition of ‘add-back’ hormonal therapy Initial treatment can be used for a limited amount of time, up to 6 months <ul style="list-style-type: none"> Duration of use may be extended with the addition of ‘add-back’ hormonal therapy¹⁵ Menstrual periods may take up to 10 weeks to return after stopping the medication¹⁷
Surgical / Procedural Treatment The choice of surgery and technique could depend on many factors for your individual case			
Ablation Excision	<p>Ablation – a non-surgical procedure that burns the surface of endometrial lesions using a high energy source such as a laser^{2,23}</p> <p>Excision – cuts away endometrial lesions²</p> <p>These procedures attempt to reduce endometriosis-associated pain by removing all visible endometriosis lesions and scar tissue without harming the healthy tissue around it²</p>	<ul style="list-style-type: none"> Can effectively reduce pelvic pain Compared to hysterectomy (removal of uterus), this type of procedure preserves fertility for women who may desire pregnancy 	<ul style="list-style-type: none"> Endometriosis lesions and pain can return Risks related to the procedure and anesthesia²
Hysterectomy	<p>Surgical removal of the uterus. If needed, the cervix, ovaries, and fallopian tubes may also be removed²</p> <ul style="list-style-type: none"> Hysterectomy is generally considered for women with endometriosis who have not experienced pain relief from medical treatment or less invasive surgeries Hysterectomy can be appropriate for women who do not wish to become pregnant 	<ul style="list-style-type: none"> Least likelihood of recurrence of disease, and of symptom recurrence, as long as the surgeon excises all existing lesions² Removal of estrogen (produced by the ovaries) can help reduce endometriosis symptoms¹⁹ 	<ul style="list-style-type: none"> Considered a major surgery associated with short- and long-term complications, some of which may not show up until a few days, weeks, or even years after surgery¹⁸ Risks related to the procedure and anesthesia Removing the uterus is not reversible and means that you can no longer become pregnant Slight chance that endometriosis symptoms and lesions may come back² if endometriosis is in other areas beyond the uterus²⁴ Risks of removing ovaries: Sends the body into a full menopausal state, and is associated with menopause symptoms such as hot flashes Early surgical menopause can increase the risks of osteoporosis, heart disease, and death at a younger age²

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