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The gynecologic surgeon's approach to evaluating a patient with suspected endometriosis: A systematic review

Objective: The objective of this review is to assess the most recent literature recommendations for how to approach a patient presenting with chronic pelvic pain, when a high clinical suspicion of endometriosis exists.

Methods: An online review of PubMed and Europe PubMed Central was conducted with a final total of 10 articles being reviewed. The search was limited to the preoperative management of these patients, excluding literature focused on the effectiveness of medical vs. surgical management of the disease. There is no main outcome measure.

Results: Delayed diagnosis of endometriosis creates a significant burden on patient well-being as well as an economic burden on the healthcare system. The literature supports the use of sonogram as the first-line imaging modality for diagnosis; however, its utility is limited to detection of the two less common forms of the disease, endometrioma and deep peritoneal lesions, with less reliable prediction of superficial implants. Laparoscopy remains the gold standard for diagnosis, notwithstanding the patients who experience persistence or recurrence of disease or require reoperation.

Conclusion: Further studies assessing biomarkers of endometriosis and specific features of the disease in time are needed to better understand the etiology and pathogenesis and to subsequently decrease disease burden.

Key words: Chronic pelvic pain, endometriosis, epidemiology, pathogenesis.

Biography

Tracey Juron is working at Queens Hospital Center USA. She is specialized in Gynecologic oncology.

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