ULTRASOUND FOLLOW UP IN ENDOMETRIOSIS: IS DEEP ENDOMETRIOSIS STATIC OR DYNAMIC DISEASE?

Zorzi Carlotta (IT) [1], Stepniewska Anna (IT) [2], Trivella Giamberto (IT) [3], Moruzzi Cristina (IT) [4], Amar Inbal (IT) [5], Scambia Giovanni (IT) [6], Ceccaroni Marcello (IT) [7], Villa Paola (IT) [8]

Introduction Even if the ovarian endometriosis is considered a progressive disease, the natural history of deep infiltrating endometriosis (D.I.E.) is not well known yet.

Objective The aim of this study was to evaluate the progress and evolution of deep endometriosis after the diagnosis, considering the effects of hormonal treatment.

Methods At the moment of diagnosis an ultrasound-based staging of endometriosis was performed with evaluation of size and location of all endometriosis nodules. Some of them (50%) did not receive hormonal treatment because of desire of pregnancy or controindications. After about one year (mean 329 days) the ultrasound-based staging was repeated.

Patients 200 patients with D.I.E come to Sacred Heart Hospital of Negrar (Italy), the reference center for endometriosis.

Interventions Expert ultrasound-based staging with evaluation of size and location of all endometriosis sites (ovarian / recto vaginal septum / rectum sigma / other locations). The pain symptoms were expressed using VAS score scale.

Results During the time of observation the lesions of the recto vaginal septum seemed to grow in about one third of the patients, intestinal endometriosis increased in approximately half of patients while ovarian cysts were not frequently increased. Medical therapy (estroprogestins or progestins) didn’t seem have great benefits on the evolution of deep endometriosis nodules.

Conclusions DIE is an aggressive, invasive and progressive disease. The use of medical therapy does not bring great benefits. If deep infiltrating endometriosis is present, it should be monitored to identify patients with progress of disease and plan the surgery.