

Endometriosis-associated Subfertility *Biological aspects and treatment options*

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Introduction

- *Endometriosis:*
Presence of endometrial glands and stroma outside the uterine cavity
- *Incidence:*
2.5 - 3.3 % in women in reproductive age

Pathogenesis

- *No true etiologic factor, only risk factors.*

Actual theories

- 1. Retrograde menstruation (Sampson)*
- 2. Coelomic metaplasia*
- 3. Remnants of Müllerian tubes*

- *Genetic factors: non-Mendelian polygenic disorder*

Classification

- *Minimal (I) and Mild (II)*

- *Moderate (III)*

- *Severe (IV)*

(American Society for Reproductive Medicine, 1996)

Clinical features

Pain

Infertility

Endometriosis-associated infertility

- *20 - 68% in infertile patients*

- *In advanced stage:*

anatomical distortion

- *In early stages:*

Association or causal link?

Possible mechanisms of endometriosis-associated infertility

- *Effects on reproductive events*
- *Alterations of peritoneal fluid*
- *Host immunological dysfunction*
- *Aberrations in steroidogenesis
(self-sustaining cycle)*

Current treatment in infertility

- Medical: GnRH agonists or ovarian suppression, and controlled ovarian hyperstimulation
(Hughes et al., 2001; Olive and Pritts, 2001)
- Surgical: Resection or ablation of minimal/mild endometriotic lesions
- IVF and ART

Future therapeutic options

- *Immuno-modulation therapies*
(Balasch et al., 1997)
- *Aromatase inhibitors*
(Scarpellini et al., 2000)

Conclusions



- *Endometriosis-associated infertility*
A causal relationship?
- *Current treatment:*
Individual and selective (surgery, IVF)
- *New strategies:*
Link between early stages and infertility