

ABSTRACT 20

Endometriosis: Socio-economic impacts and what we need to do

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Abstract

Endometriosis is characterized by growth of uterine material outside the uterus, excessive menstrual discharge, pelvic and lower back pain, dysmenorrhea, dyspareunia and infertility. It has been reported to occur in 10 to 15% of women in reproductive ages. Many theories have been advanced to explain its origin but retrograde menstruation proposed by Sampson in 1920s proposing that eutopic endometrial material travels to peritoneal cavity through fallopian tubes is supported by multiple lines of scientific evidence and most widely accepted. The disease results from a complex interplay of TGF- bettas, matrix metallo-proteinases and a host of other reactions. The disease is managed by medical interventions but surgery remains the gold standard for treatment. Cost of management is prohibitive and includes ambulatory charges, hospitalization, cost of medication, time-off work and psychosocial impacts associated with infertility. That the disease affects women who already bear huge responsibilities at family level elevate the psychosocial impacts to unbearable levels. There is need to form multi-institutional basic science and clinical research teams to advance knowledge on diagnosis and management, share data, and use research outcomes to advance awareness, advocacy and policy changes to accommodate management of endometriosis as priority healthcare need requiring deliberate national budgetary support.

Key words: Endometrisis, economic and social impacts