

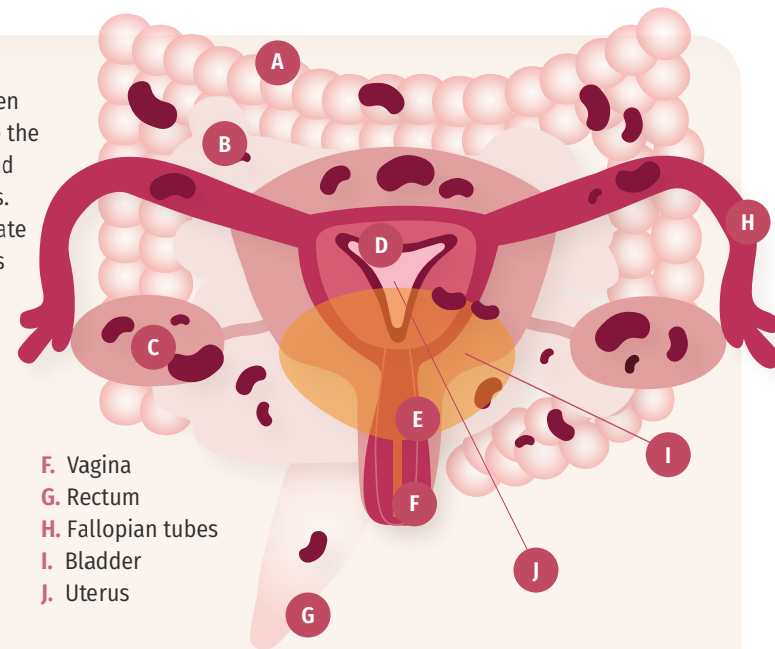
GET ENDO EDUCATED

What are some **topics** on endometriosis that I can talk to my provider about?

Endometriosis is a complicated condition. While there's no cure right now, there are some ways to manage it. Communication is essential to help your provider decide the best plan for you.

This guide will help you find important topics to bring up with your provider. This is important when discussing how to address your endometriosis-related symptoms. You should revisit these topics regularly with your provider, especially if your symptoms are not controlled or if you are considering a new treatment plan.

Endometriosis is when tissue that looks like the uterine lining is found outside of the uterus. The dark spots indicate where endometriosis can happen.



- | | |
|----------------------------|---------------------------|
| A. Large intestine | F. Vagina |
| B. Small intestines | G. Rectum |
| C. Ovaries | H. Fallopian tubes |
| D. Endometrium | I. Bladder |
| E. Cervix | J. Uterus |

Ask your provider to use this image to help explain your endometriosis.



Medical History

Some medical conditions may make some treatments not safe or less effective. Talk to your provider about any medical conditions you may have.



Family Planning

Consider your plans to become pregnant now or in the future and your desire for birth control. Be sure to tell your provider what your plans are.



Common Warning Signs

Endometriosis is different in every individual. So, talk with your provider about any of these common warning signs you may be experiencing:

- Pelvic pain or lower abdominal pain that is not related to your period
- Pain during menstruation, intercourse, urination, and/or bowel movements
- Problems getting pregnant
- Heavy bleeding during your period or bleeding/spotting between your periods
- Digestive or gastrointestinal symptoms

Even if warning signs improve, it may be important to share these symptoms with your provider.



Medicines

Talk with your provider about any prescription or over-the-counter medications you have been or are currently taking. This includes those used to manage your endometriosis symptoms. Talk about how well they worked or if you experienced any side effects or allergic reactions.



Management Choices

Talk about any preferences and goals that you have for your treatment, and discuss each management option to decide the best choice for you:

- Medicines
- Surgery
- Non-medical and non-surgical management, such as what you eat, exercise, and pelvic physical therapy

What types of treatment options are available?

Managing your endometriosis-related pain should involve a discussion between you and your provider. Discussions based on the topics outlined in this document will help your provider understand your condition and how it impacts you. These discussions will also help you make treatment choices that are

right for you. While reviewing the options below, keep in mind that costs and insurance coverage can vary. This list does not contain every treatment choice that may be presented during your visit. While the treatments below may help improve endometriosis symptoms, there is no cure for endometriosis.

MEDICINES TO REDUCE ENDOMETRIOSIS-RELATED PAIN	Treatment Type*	Acts as Birth Control†	Avoid Treatment If You:‡	Influence of Pregnancy on Treatment			Notable Treatment Side Effects
				Currently pregnant	Trying to get pregnant	Considering pregnancy in the future	
	Birth control (pill, patch, ring)	✓	<ul style="list-style-type: none">Smoke (over age 35 years)Have certain cancers, heart or liver conditions, migraines with auras, a history of blood clots and high blood pressure	✗	✗	✓	Spotting, breast tenderness, headache, feeling like you're going to throw up
	Progestins	✓	<ul style="list-style-type: none">Have certain cancers; or uterine or liver conditionsHave a history of weight-loss surgery or using certain medications	✗	✗	✓	Headaches, irregular or missing periods, spotting, swelling, bloating, weight gain, feeling like you're going to throw up
	Gonadotropin-releasing hormone (GnRH) activators	✗	<ul style="list-style-type: none">Have certain uterine conditionsHave a sensitivity to the medication	✗	✗	✓	Vaginal dryness, hot flashes, headaches, weight gain, acne, decreased sex drive, weakening of bones
	GnRH blockers (with or without hormone therapy)	✗	<ul style="list-style-type: none">Have certain cancers; or uterine, liver, heart, or skeletal conditionsHave a sensitivity to the medication	✗	✗	✓	Hot flashes, headache, feeling like you're going to throw up, weakening of bones
	Aromatase inhibitors	✗	<ul style="list-style-type: none">Have a sensitivity to the medication	✗	✗	✓	Vaginal dryness, hot flashes, weakening of bones
	Androgenic steroids	✗	<ul style="list-style-type: none">Have certain cancers; or uterine, kidney, liver, or heart conditions	✗	✗	✓	Acne, swelling, spotting, weight gain, muscle cramps, deepening of voice, increased facial hair
SURGERY	Excision/ablation (cutting out or removing damaged tissue)	✗	<ul style="list-style-type: none">Have any health problem that would make excision/ablation not safe	✗	✓	✓	May affect fertility
	Hysterectomy (cutting out or removing the uterus)	✓	<ul style="list-style-type: none">Have any health problem that would make surgery not safe	✗	✗	✗	Eliminates possibility of conception

*Non-medical approaches include what you eat, exercise, and pelvic physical therapy. Talk to your provider about these approaches.
†Some medical treatments listed are not birth control. They may be prescribed together with birth control to prevent pregnancy.
‡Not an exhaustive list. If you have an allergy to any of the medicines, do not take the medicine.