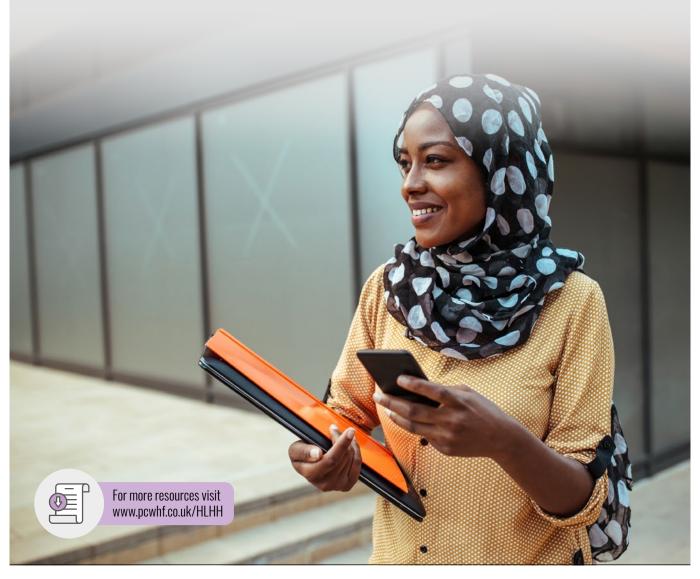
## HerLife HerHealth



## 10 top tips for Endometriosis Management in Primary Care

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## 10 top tips for Endometriosis Management in Primary Care

A 3-MONTH MENSTRUAL DIARY FOUND ONLINE OR DOWNLOADED AS AN APP IS A GOOD DIAGNOSTIC TOOL

There will be as many women in your surgery with endometriosis as there are with either diabetes, asthma or back pain.

A 3-month menstrual diary found online or downloaded as an app is a good diagnostic tool (also note cyclical bowel/urinary).

Appreciate the impact of symptoms on her psychological and social wellbeing.

Perform abdominal +/- pelvic and speculum examination and sexual health screening as appropriate.

USS is recommended to exclude endometriomas (warn patient that transvaginal (TV) scan is best) BUT a normal result does not exclude endometriosis.

Commence simple analgesia or combined oral contraceptive/ desogestrel at first visit (choice of treatment dependent on imminent fertility requirements).

On review, recommend continuous hormonal treatment and signpost to Endometriosis UK for patient support.

Consider referral to secondary care if symptoms change or continue, or for patient choice.

Longer term concerns include managing fertility issues and chronic pain management where indicated.

Following surgical treatment (pelvic clearance) use continuous combined HRT or tibolone for at least 3 years post-surgery before considering changing to oestrogen only.