



BENEFITS OF ENDOMETRIOSIS SURGERY BEFORE IVF

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Endometriosis is a prevalent pathology with an estimated range from 2 to 10% within the general female population but up to 50% in infertile women. Women with endometriosis experience painful symptoms and/or infertility or no symptom at all. Diagnosis is based on medical history, symptoms and signs. Physical examination remains important as well as imaging techniques to locate disease in relation to bowel, ovaries and uterus. Nevertheless endometriosis is finally proven by histology.

In women with endometriosis wishing to conceive, Surgery and assisted reproductive technology (ART) have proven efficacy to enhance fertility rate. The balance between surgery and ART remains debated and predictive models are not available. It seems logical to propose surgery first when women with deep infiltrating endometriosis suffer from pain. On the other hand, ART remain the first-line option with older women or when infertility is due to male condition, tubal obstruction or poor ovarian reserve.

When these characteristics are not encountered, surgery could be an option and patient wishes should be the cornerstone of the final decision.

Endometriosis surgery is associated with complications mainly when endometriosis infiltrates organs. This surgery should be planned after having fully informed patient, an accurate cartography of the disease and in an expert center in order to understate morbidity.

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