

## **Endometriosis and fertility**

Some women with endometriosis may become pregnant without any difficulty, however there is an association between endometriosis and infertility. In advanced forms of endometriosis where there is significant scarring and anatomical distortion in the pelvis, release and transport of egg from the ovaries through the fallopian tubes may be compromised. Similarly, sperm and embryo transport in the fallopian tubes may also be affected in these situations. Altogether, these factors may reduce fertility.

In early forms of endometriosis, the association between endometriosis and infertility is more controversial. Nevertheless, this form of endometriosis is more common in women with fertility difficulties. There is also some evidence that surgical elimination of early endometriosis increases fertility rates, suggesting that even early forms of endometriosis may reduce fertility.

## **What are the treatment options for fertility in women with endometriosis?**

Some women may conceive without any treatment. When there is a difficulty in conceiving there is no benefit of using hormonal treatment to improve fertility. Surgical treatment, usually in the form of laparoscopic surgery is known to increase chances of pregnancy. Elimination of endometriotic spots, nodules and scarring and restoration of pelvic anatomy at surgery tends to increase pregnancy rates.

In some women with endometriosis, surgery on its own may not be enough to achieve a pregnancy and additional treatment may be needed. If the pelvic anatomy is relatively normal and the fallopian tubes are open artificial insemination (intrauterine insemination, IUI) may be beneficial. This is usually combined with the use of fertility drugs to increase the number of eggs released during the treatment cycle to improve success rates. However, when the pelvic anatomy is severely damaged, particularly when the Fallopian tubes are blocked or when the other treatment options fail, test tube baby treatment (IVF) may become necessary. In women where the fallopian tubes are severely damaged the option of removing the tubes (salpingectomy) prior to IVF treatment may be discussed.

**Ovarian function**

Endometriosis involving the ovaries is known to affect ovarian reserve. This is the potential for the ovaries to produce eggs. However, treating ovarian cysts can also have a negative effect. Age, previous surgery and whether or not both ovaries have cysts that require treatment will influence the potential for surgery to have a negative effect on ovarian reserve. You may be recommended to see a fertility expert before surgery to consider either egg preservation or embryo storage prior to surgery.