ENDOMETRIOSIS

A PERSONAL EXPERIENCE

In early 1979 I went to the doctor because I had begun to experience episodes of acute pelvic pain. These episodes would last for up to an hour and would be extremely intense. I would be immobilized by the pain and would be sore in my pelvic area for hours after the peak of the pain had passed. As I remember, the pain did not necessarily coincide with my period.

I was told by the doctor that I might have Pelvic Inflammatory Disease (P.I.D.) and that I should have as much bedrest as possible. Doctors frequently confuse endometriosis with P.I.D. When the episodes of pain persisted I went to a gynecologist who did a laparoscopy and confirmed that I had endometriosis. At that time I had an endometrial cyst on my left ovary and scarring on both my tubes. There are ways of classifying endometriosis according to the number, size and location of the endometrial implants. According to this type of classification, I believe that I then had endometriosis moderately. I was 32, and had never been pregnant.

I took the hormonal drug Provera for a couple of months. This drug acts like the Pill in that menstruation

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ADENOMYOSIS

JUNE, 1985

Adenomyosis is a condition in which the endometrial tissue that lines the inside of the uterus is found growing into the muscle wall of the uterus. It is an abnormal glandular condition (Glands are found in the wall of the uterus and endocervical canal.) It can resemble fibroid tumors and like fibroids, it enlarges the uterus so that it is swollen. Supposedly it affects women nearing menopause. Some women may only find out that they have it after the uterus is removed and examined microscopically.

Some medical people think adenomyosis is the same as endometriosis and others think it is a separate condition. It may be difficult to diagnose and may be confused with fiboirds.

Symptoms: Abnormal menstrual bleeding Menstrual pain Many women have no symptoms

Treatments: (Please see Endometriosis Alternative and Medical Treatments)

Adenomyosis declines with menopause Hormones
D & C (dilation and curretage)
Hysterectomy

is suppressed, one of the theories being that without bleeding every month the endometrial implants stop bleeding too. I only took Provera for a short while because I had decided to try and get pregnant. I did get pregnant (the first time I tried, incidentally), but I had a miscarriage at nine weeks.

In the months afterwards I was getting pelvic pain frequently around the 7th to 10th day of my cycle, as well as acute episodes of pain at other times. My periods lasted a long time, with heavy bleeding, large blood clots and low back pain. On my gynecologist's recommendation I had a D & C because of my heavy periods. My period did get slightly lighter, but that only lasted for a couple of months before it went back to how it had been before the operation. increasingly worse. I was losing my appetite, I lost weight, my hair was falling out and I felt quite tense a lot of the I was getting brownish blood at the end of my period time. which lasted for days, and which would then stop for a few days and then start again. Often there were only a few days in my cycle when I wasn't bleeding. My gynecologist told me (this was in 1981) that I had the following choices: I could take combination hormones in the form of birth control pills; Incould have shots of the hormone Depo-Provera (which has extremely high cancer risks); I could try to get pregnant again; I could undergo surgery; or at some point I could

having a hysterectomy. None of these options made me happy.

There seemed to me to be many risks involved in taking
hormonal drugs, and I knew that neither pregnancy nor surgery
were guarantees that endometriosis would not recur.

Emergency and was operated on. Because of some evidence of infection that the doctors apparently saw in my pelvic area, I had my appendix taken out. It turned out to be completely healthy! The doctors still thought I might have a pelvic infection so I was put first on intravenous, then on oral, antibiotics. I was on antibiotics for about seven weeks altogether. From what I know of endometriosis now, the reason for the acute pain was probably an endometrial cyst bursting. This can be extremely painful, but does not necessitate surgery. Because doctors know so little about endometriosis, it is easy for them to misdiagnose its symptoms.

After that experience I decided to do some things on my own to improve my health. I stopped smoking (I had smoked at least a pack a day for 15 years) and drank alcohol only occasionally. I gave up coffee, although I went back to it after a year, and ate more salads and fruit and less meat and fried foods. I began to eat meals more regularly and to get

more sleep. I then went to see a herbalist. Her emphasis was on countering the effects of stress and improving the general health of my pelvic area. So I took Vitamins A, E, C, zinc and dolomite. These were needed, she said, for my pelvic area and ovaries, and for my liver and adrenal glands. I drank raspberry leaf tea, and took Dr. Christopher's MEN and FEM herbal mixtures. Herbs which I have heard from several different sources are helpful in the treatment of endometriosis are: Dang Quai, blue and black cohosh, squaw vine, false unicorn, trillium, geranium and raspberry leaf.

I followed this treatment for several months. I also had regular massage treatments for about a year, followed by about a year of reflexology (foot massage) treatments. Exercise is recommended for endometriosis to keep the pelvic area flexible and to loosen adhesions, and I continued with my swimming which I have done regularly for many years.

The acute episodes of pain began to occur much less frequently, and the pain associated with my period became less, too. My periods started to get lighter. However, the brownish bleeding I was having at the end of my period continued to last for several days and then would recur intermittently throughout my cycle. To rule out the slight possibility of endometrial cancer my gynecologist recommended

another D & C. I didn't have any cancer and the D & C did nothing to stop the irregular bleeding. I also had two ultrasounds at various times to try to identify the causes of the pain I was still getting. The ultrasounds showed endometrial cysts, adhesions and scarring in my pelvic area, but nothing new.

I began to take the drug Motrin, an anti-inflammatory painkiller. I found it quite effective. I felt better after I had taken it, not just in the sense of the pain going away. It didn't make me feel "out of it", either.

I was still having some episodes of acute pain, and pain with my period. After reading the article called "Endometriosis" in Let's Live (January, 1983), I began to do a course of Vitamin B therapy. In general terms, this is recommended to improve the function of the liver in the breakdown of estrogen. I took 100 mg. of B-complex vitamins, 1,000 mg. of choline and 500 mg. of inositol a day. I also took 500 mg. of B-6 with the mineral magnesium. Because Vitamin E helps normalize the reproductive organs, I took 600 I.U. of E daily. After several months I found that my periods had improved a great deal. They were shorter, lighter, with almost no blood clots, although the brownish blood after my period continued.

Then I noticed some changes. The intense attacks of pain which had been occurring so much less frequently began to recur more often. The pain with my period had moved closer to the beginning of my cycle. I was now getting pain around the 3rd to 4th day of my cycle which lasted, to some degree or another, for several days. The location of the pain had shifted from the front of my pelvic area to around my rectum. During those few days I felt nauseated, bloated and was constipated. I didn't feel well at all.

I began a series of acupuncture treatments. To begin with I had five treatments in two weeks, and then they were more spaced out. When I went to a different acupuncturist I sometimes went before my period, sometimes when I was experiencing pain, and sometimes during the time when the brownish bleeding was occurring. The change in my periods has been quite noticeable. For the first time in over four years the brownish bleeding is much less. I now have almost (but not quite) what I would consider to be a "normal" period. I had regular acupuncture trreatments for about six months.

The bleeding was better, but in many ways I felt the pain I was experiencing was worse. Then I decided to cut down on wheat and on citrus fruits. It is said that these foods contribute to an imbalance of estrogen in the body,

with acute flare-ups of pain in women with endometriosis as a result. When I cut down on these foods I noticed a dramatic difference. The pain, nausea and bloating I experience now with my period are minimal. I have also cut down on dairy products, and I think that doing this has helped the constipation, too. I have only made this change in my diet in the last three or four months, but I am quite hopeful that if I continue to do this these symptoms will continue to be improved. As I have not had a laparascopy for a few years I do not know the actual extent of the endometriosis I now have. However, I feel very much better than I used to, which encourages me to think that the endometriosis must have diminished considerably.

D.M.

June, 1985

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