The Effect of Acupuncture in a Patient with Endometriosis

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Introduction

• Positive diagnoses of endometriosis have increased significantly in the last decade, making it one of the most prevalent conditions in women of reproductive age.

• Currently, the average time between the onset of the disease and the diagnosis is 7-9 years.
Introduction

• In addition, the incidence of endometriosis has been reported in several publications to vary from 5% to 15% in the young population (15-25) and from 2% to 5% in postmenopausal women, compromising their work, social life, and personal relationships over time.
Case Report

- Caucasian woman,

- 27 years old,

- Diagnosed with endometriosis 5 years ago,

- Reports difficulty and pain to urinate, dyspareunia, chronic pelvic pain and dysmenorrhea.
Endometriosis can impair the functionality of different organs and affect multiple systems.

For a long time, it was considered to be a gynaecological disease. However, recently, with the advent of new tracking techniques for identifying endometrial lesion outbreaks, diagnosing this condition requires the collaboration of different specialists.
• After three years was diagnosed performed the first laparoscopy for diagnosis and treatment, which were found very large outbreaks of endometrial adhesion on the left ureter and endometrioma in the rectovaginal septum.
Left Ureter
Rectovaginal Septum
Case Report

• After laparoscopy the patient used hormones for 6 months and stopped to try to get pregnant.

• After a year of frustrated attempt, symptoms return with similar intensity before surgery.

• To continue her attempt to get pregnant, she opted for a more natural treatment, with minimal side effects.
Acupuncture Treatment

- 20 sessions
- 2 × per week
- Time: 50 minutes
- Acupoints: VB29, BP6, BP9, F8, F3, R10, BP10, Ren 3.
- For analysis, we used the VAS scale
### Results

<table>
<thead>
<tr>
<th></th>
<th>VAS Before</th>
<th>VAS After</th>
<th>Percentage Improvement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pelvic pain</td>
<td>6</td>
<td>1</td>
<td>83%</td>
</tr>
<tr>
<td>Dyspareunia</td>
<td>5</td>
<td>2</td>
<td>40%</td>
</tr>
<tr>
<td>Dysmenorrhea</td>
<td>8</td>
<td>4</td>
<td>50%</td>
</tr>
<tr>
<td>Dysuria</td>
<td>5</td>
<td>1</td>
<td>80%</td>
</tr>
</tbody>
</table>
Results

- The patient continued to be accompanied in their routine visits,
- She reported that the pains were still minors,
- Four months after therapy acupuncture patient became pregnant,
- Her baby was born after 37 weeks of gestation,
- His birth was cesarean.
Discussion

• Previous studies established that analgesia induced by acupuncture involves a differential threshold stimulation of small-diameter nerves.

• These nerves, located in the epidermis, send messages to the spinal cord, which activates neurons in the brain stem and hypothalamus, triggering systematically endogenous opioid secretion.
Discussion

• This response promotes changes in plasma levels of endorphins, enkephalins, and stress hormones such as adrenocorticotropic hormone, which partially explains why CPP and dyspareunia decreased by more than 60% in the EG.
Discussion

• The average relief level obtained from acupuncture for other types of pelvic pain (associated with dysmenorrhoea, myomas, and ovarian cysts) has been reported as higher than 40%, in contrast with that in drug-therapy studies (<30%).
References


References

