

## Bölüm 20

# ENDOMETRİOZİS VE MEDİKAL TEDAVİ

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Endometriozisin tedavisi hastanın şikayetlerine, şikayetlerinin şiddetine, lezyonların yerleşim yerine ve fertilitte isteğine bağlı olarak düzenlenmektedir. Tedaviye karar vermedeki ana faktör hastanın infertilite için mi yoksa ağrı şikayetleri için mi tedavi edileceğidir. (1) Hasta tanısı kesin olarak konmamış ve endometriozisten kaynaklandığı düşünülen ağrı semptomları için tedavi istiyorsa; menstrüel kan akımını azaltmak için hormonal tedavi uygundur. Kesin bir tanı olmadan endometriozis kaynaklı düşünülen ağrının ampirik tedavisi analjezik, progestinler, nutrisyon terapisi veya oral kontraseptifleri içermektedir. Ayrıca GnRH agonistleride kullanılabilir ancak bu ilaçlar oral kontraseptiflere göre daha fazla kemik yoğunluğu üzerine etkili, daha pahalı ve daha fazla yan etkiye sahiptir. (2)

### **Ağrının Medikal Tedavisi**

#### ***Nonsteroid Anti-İnflamatuar İlaçlar (NSAİİ)***

Endometriozisin kronik inflamatuvar süreci olan bir hastalık olduğundan dolayı anti-inflamatuar tedavi etkili gözükmektedir. Endometriozis ile ilişkili ağrı nosiseptiftir, ama endometriotik lezyonlardan persistan nosiseptif inputları; artmış yansıyan ağrı ve somatik hiperaljezi ile meydana gelen santral sensitizasyona neden olur. (5)

Bu sınıftaki ilaçlar prostoglandin seviyelerini azaltarak ağrının hafiflemesini sağlarlar. Ayrıca endometriozis ile ilişkili ağrı ve enflamasyondan sorumlu olan prostoglandinlerin sentezinde görevli enzimler siklooksijenaz izoenzim 1 ve 2 (COX-1 VE COX-2)'yi inhibe ederek etki gösterirler. Örneğin araştırmacılar tarafından endometriotik dokunun normal endometriumdan daha fazla COX-2 bu-

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