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INFLUENCE OF ENDOMETRIOSIS IN ANTERIOR-COMPARTMENT ON PREOPERATIVE URINARY ABNORMALITIES IN WOMEN WITH ENDOMETRIOSIS IN POSTERIOR-COMPARTMENT

Hypothesis / aims of study

Considering only women who were affected by deep infiltrative endometriosis (DIE) in the posterior-compartment, we aim to assess the association between the occurrence of preoperative urinary abnormalities (specific urinary symptoms and urodynamic findings) and the presence of DIE also in the anterior-compartment.

Study design, materials and methods

Cross-sectional (pre-planned) observational study (Canadian Task Force Classification II-2) including a total of 50 women (aging 15.8 to 52.8y) who were evaluated before undergoing laparoscopy for DIE during preoperative diagnostic routine from June/2011-August/2013.

Preoperative diagnostic of DIE was suspected with basis on clinical features and ensured by an experienced radiologist with basis on nuclear magnetic resonance imaging. Anterior-compartment included bladder, anterior cul-de-sac, anterior broad-ligament, anterior uterine serosa and round-ligaments. Associations between dichotomized variables were assessed through nonparametric Fisher's Exact Test (2-sided).

Results

The prevalence of DIE-lesion in the anterior-compartment in this sample of women with DIE and posterior-compartment was 38.5% (95%CI: 25.5-52.0%) whereas the prevalence of urinary symptoms was 34.0% (95%CI: 20.7-47.2%). Considering the main urinary symptoms (urgency, perception of bladder fullness, incontinence, diurnal micturition, nocturia, dysuria/strangury, interrupted urine flow, Valsalva maneuver and *feeling of incomplete urination*) and the main urodynamic variables (maximum flow, post-voiding residue, sensitivity, complacency, maximum cystometric capacity, opening pressure, maximum detrusor pressure, detrusor contractility according Schäffer's nomogram and obstruction according Abrams-Griffiths's nomogram), there was no significant association between DIE-lesion in the anterior-compartment and any urinary symptoms or any variable assessed during urodynamic testing.

Concluding message

Our preliminary findings suggest that preoperative urinary abnormalities are independent of presence of endometriosis in the anterior-compartment when women are affected by DIE in posterior-compartment. Actually, data didn't allow exclude the probability of preoperative urinary abnormalities be linked to any pelvic structures.

Disclosures

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