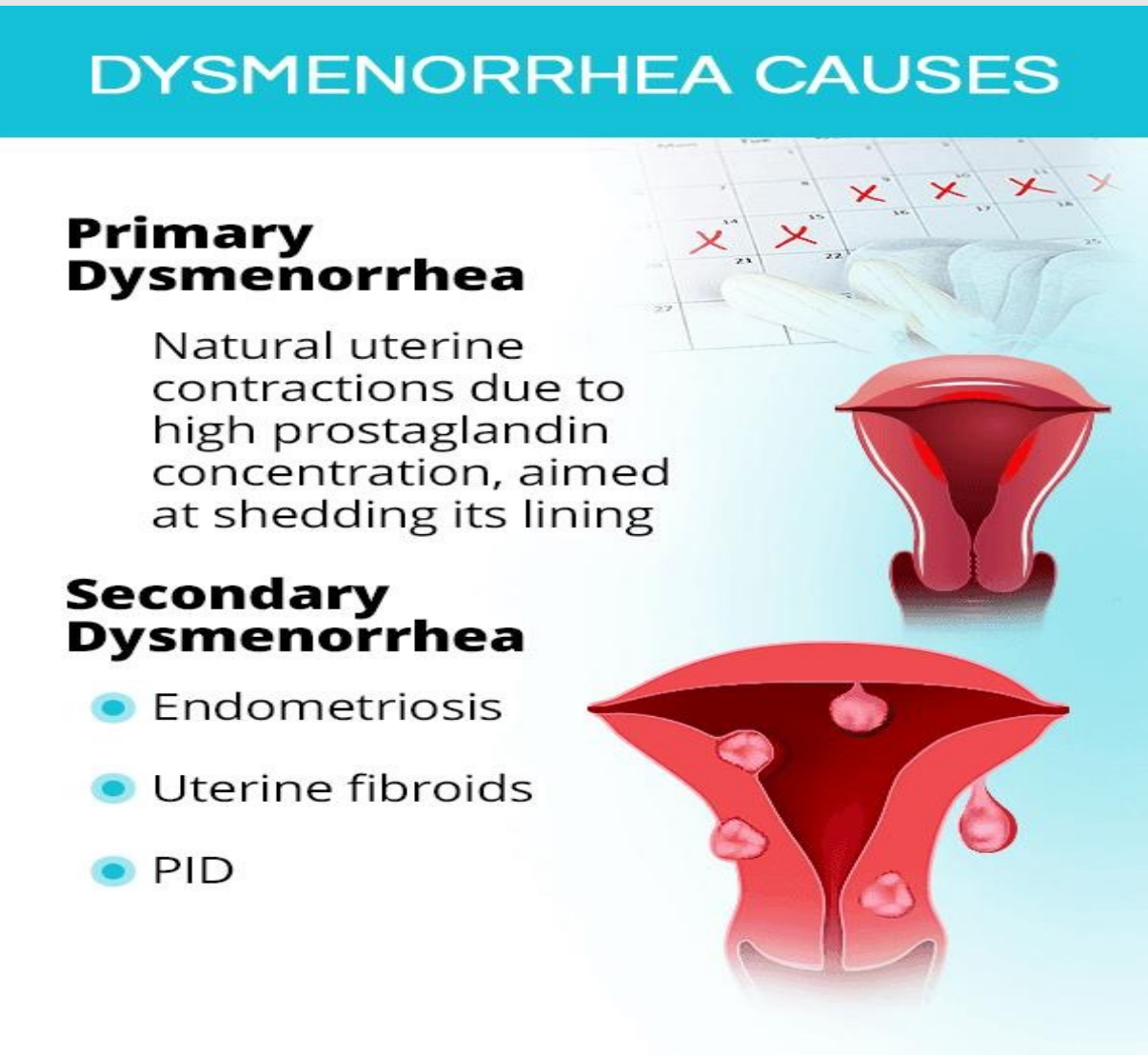


Dysmenorrhoea as a potential ectopic pregnancy risk factor: a retrospective cohort study

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Introduction

Dysmenorrhoea has a high prevalence of over with many chronic suffers going on to be diagnosed with endometriosis. The relationship between endometriosis and ectopic pregnancy has been explored in the literature. However, endometriosis is often underdiagnosed, therefore dysmenorrhoea could be an interesting proxy measure instead. Our objective was to understand and explore the significance of dysmenorrhoea, among other symptoms suggestive of endometriosis with ectopic pregnancy.

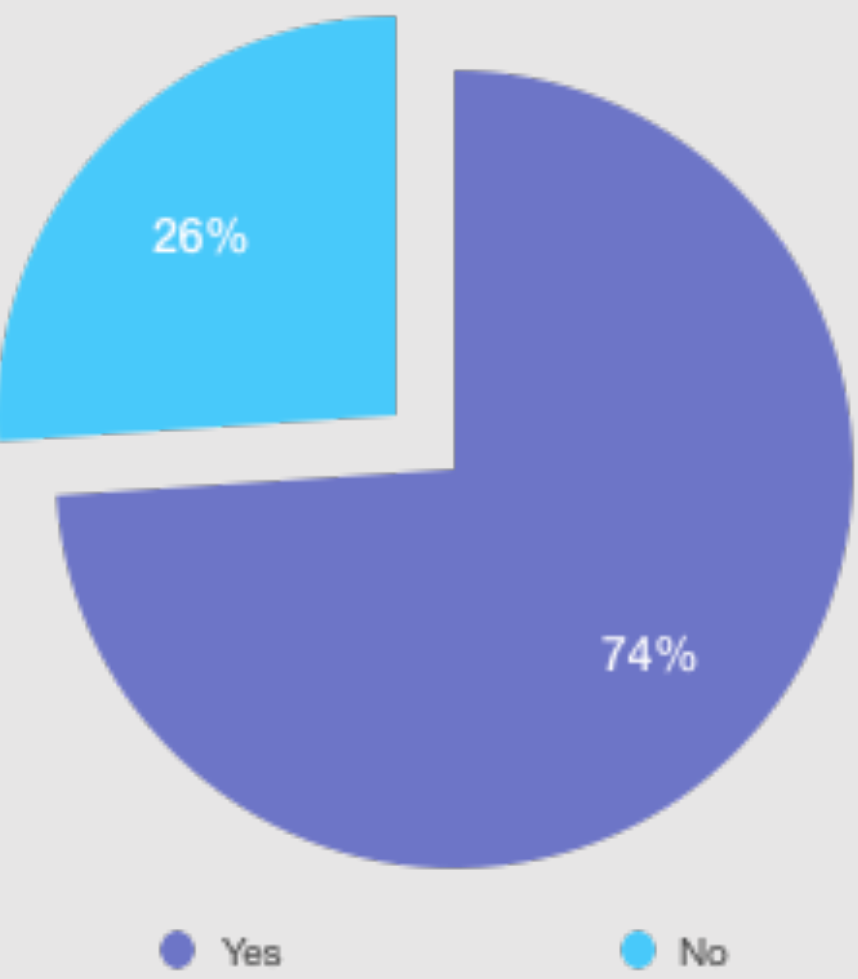


Methodology

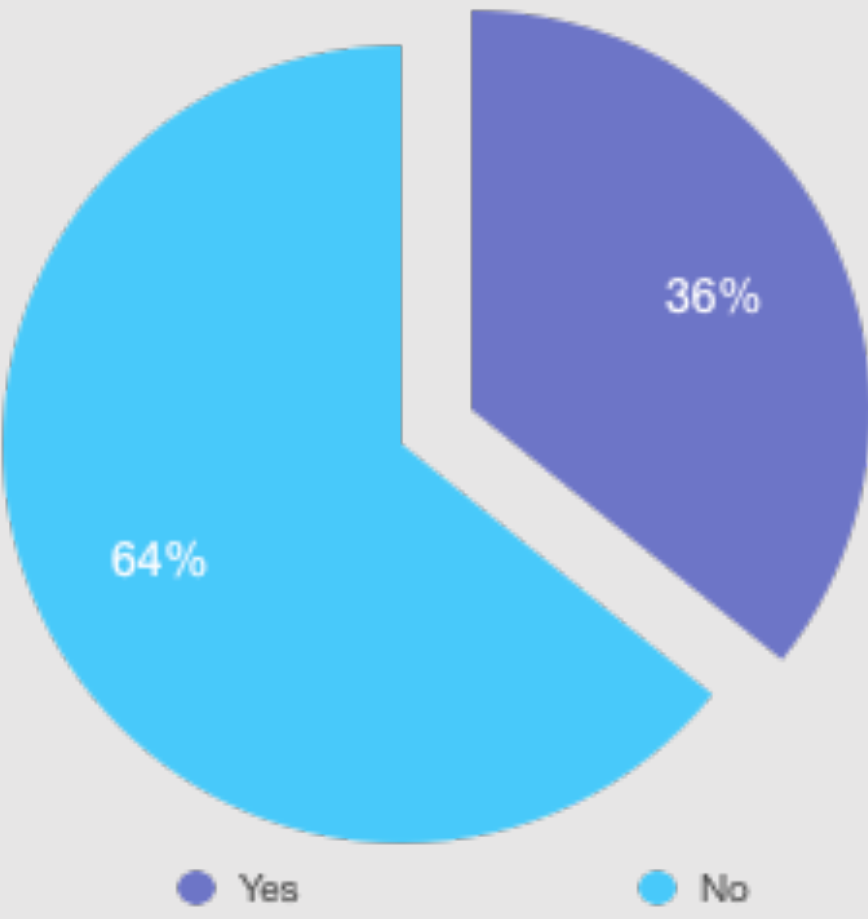
A retrospective 7-year cohort study. A total of 238 women met the criteria for inclusion in the study as they were surgically treated for ectopic pregnancy during from 2014-2021. The patients were managed over a 7-year period from Newham University Hospital, Bart’s Health NHS Trust. Each patient case was investigated for clinical demographic details, history of dysmenorrhoea, miscarriage and/or a formal diagnosis of endometriosis.

Results

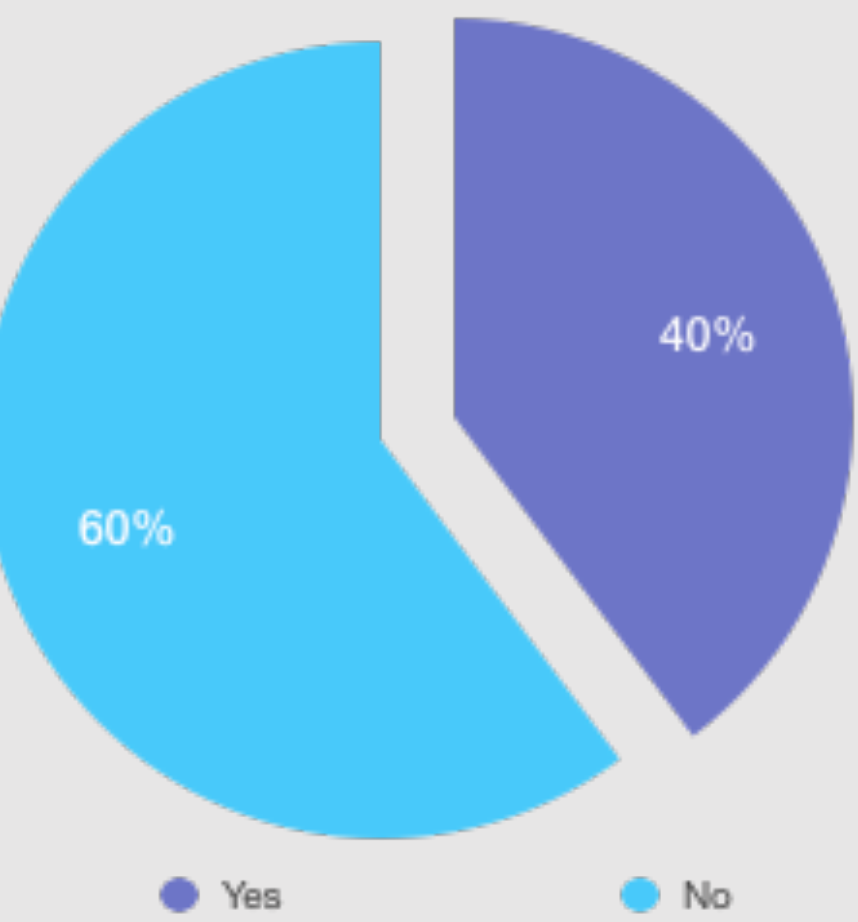
- Of the 238 women, 176 (74%) had dysmenorrhea
- Of the 176 patient who had dysmenorrhoea, 63(35%) were diagnosed with endometriosis
- 70(40%) women with history of miscarriage.
- 114 women (65%) were reported to have NSAID use for their dysmenorrhoea



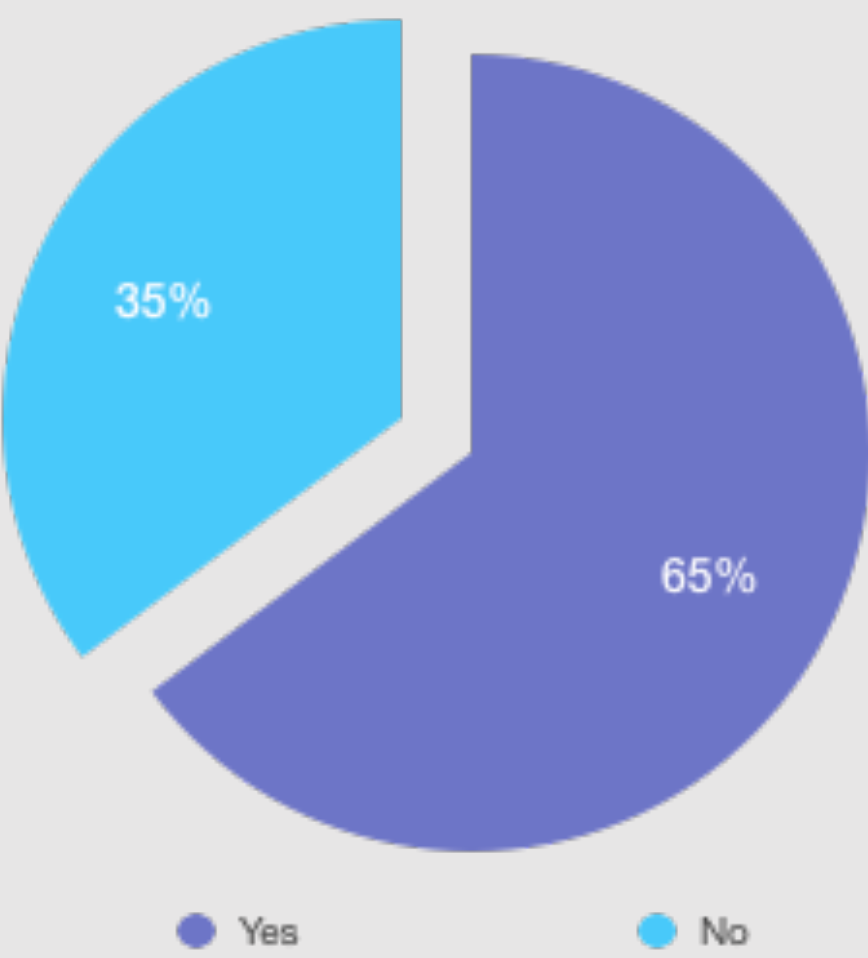
Dysmenorrhoea



Endometriosis



History of Miscarriage



NSAID use in dysmenorrhoea

Conclusion

Conclusions: Our surgically managed ectopic pregnancy group supports the hypothesis that dysmenorrhoea is likely implicated as a risk factor for ectopic pregnancy. Many had a formal endometriosis diagnosis and others had a history of miscarriage too which would be significant for high clinical suspicion of endometriosis also. Access to early diagnosis and effective treatment of Dysmenorrhea is important, but is limited in many settings, including in low- and middle-income countries. There is a need for more research and awareness to ensure effective prevention, early diagnosis, and improved management of dysmenorrhoea. We will also continue to audit this across subsequent years.

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