

Pregnancy Outcomes in Women With Endometriosis: A Retrospective Audit

Dr Adewunmi Toluwase¹, Dr Prince Osam-Duodu¹, Ms Ayesha Mahmud¹
University Hospital of North Midlands, Stoke on Trent

Background

- Endometriosis, a chronic condition involving endometrial-like tissue outside the uterus, is linked to adverse pregnancy outcomes.
- Complications reported in the ESHRE Endometriosis guideline include endometrioma rupture, infection, and intestinal perforation.
- Women with endometriosis are at increased risk of miscarriage, ectopic pregnancy, preterm birth, stillbirth, small for gestational age (SGA) neonates, and NICU admissions.
- Maternal risks such as gestational diabetes (GDM) and hypertensive disorders are also elevated.
- This study evaluates pregnancy outcomes in women with endometriosis.

Method

- Data was retrospectively collected from electronic records and the BSGE database.¹
- Women diagnosed with endometriosis who were pregnant between January 2020 and January 2022 were included.
- Participants were categorised by disease severity. Variables analysed included maternal demographics, pregnancy, and foetal outcomes.
- Data analysis utilised descriptive statistics and logistic regression.

Results

- Eighteen cases were included, with 16 (89%) having deep and 2 (11%) superficial endometriosis.
- Miscarriage rates were higher in those with deep endometriosis (28%) versus the general obstetric population.
- Severe endometriosis was linked to increased risks of pre-eclampsia and GDM.
- Postpartum haemorrhage rates showed no significant difference. Caesarean sections accounted for 44% of deliveries, with no difference between severity groups.
- The mean birth centile was 22 (7th-99th). Two preterm births were recorded, with one NICU admission and no stillbirths.

Birth Weight	Number
< 1.5kg	0
1.5-2.5kg	2
2.5 – 4Kg	8
>4kg	0

The lower birth weight was recorded in a woman with twin gestation

Table 1 : Fetal Birth Weight

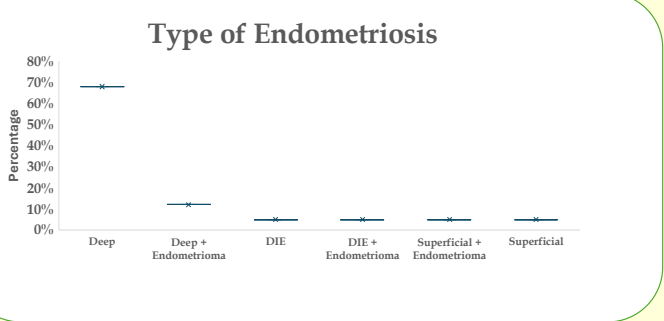


Figure 3: Type of Endometriosis

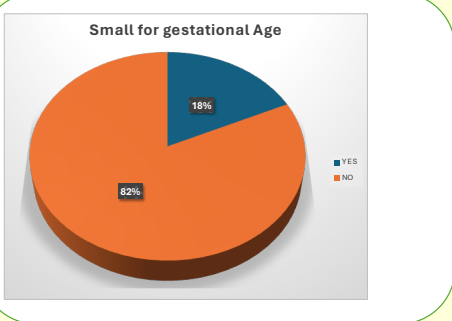


Figure 7 : Fetal outcomes

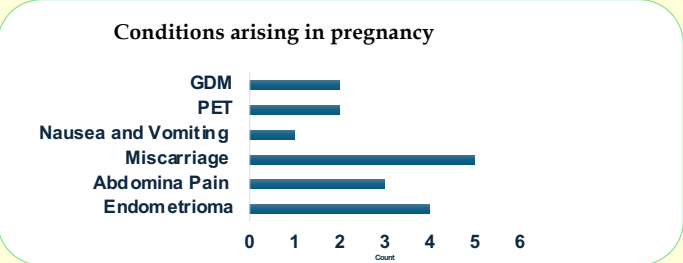


Figure 1: Antenatal Complications

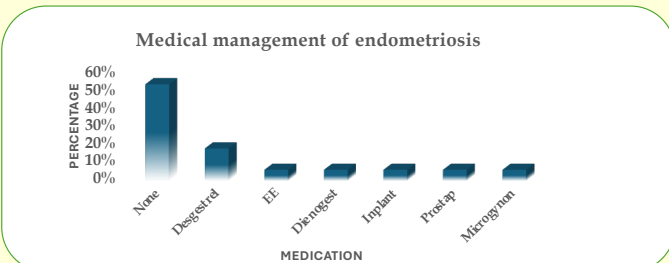


Figure 4 : Medical Management of Endometriosis

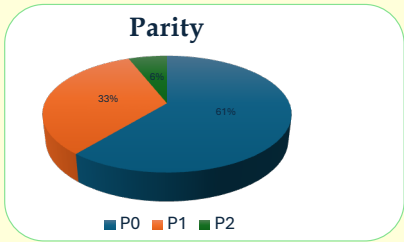


Figure 2 : Parity

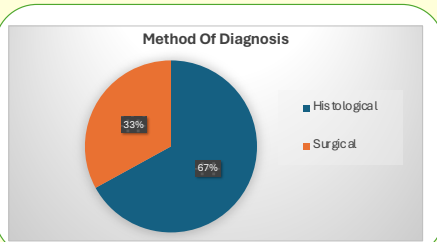


Figure 5: Diagnosis of Endometriosis

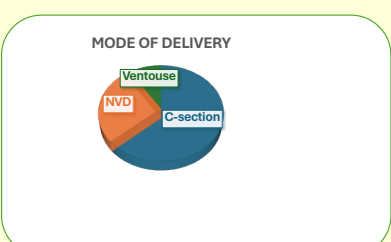


Figure 6 : Mode of Delivery

Maternal Complications

- Two cases of postpartum haemorrhage (PPH) with Estimated blood loss: 3.5 litres and litre each.
 - One patient required a blood transfusion
- No case of:
- Return to theatre
 - Visceral injury
 - Obstetric hysterectomy

Intrapartum Complications

- Preterm Births: 2 cases
- Placenta Praevia: 1 case
- Instrumental Delivery: 1 case

Conclusion

- Endometriosis presents significant pregnancy risks, especially in severe cases.
- Findings highlight the need for tailored antenatal care, early screening, and improved counselling.
- Future research should explore preventive interventions and multidisciplinary management for high-risk pregnancies. Standardised data collection and a national endometriosis pregnancy outcomes registry are essential.
- Results will guide clinical practice and inform educational resources for patients.

References

- British Society for Gynaecological Endoscopy (BSGE) database.¹
- www.eshre.eu/guideline-endometriosis