

Excellence in Endometriosis Care : Three - year audit driving BSGE Accreditation

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INTRODUCTION/BACKGROUND

- Endometriosis affects 1 in 10 women and often leads to delayed diagnosis and fragmented care. (1).
- This audit evaluated current services at Southend University Hospital to support BSGE accreditation.
- Establishing a tertiary centre would reduce waiting times, improve multidisciplinary care access, and enhance patient satisfaction by offering timely, specialist-led treatment locally, aligned with national standards.

OBJECTIVES/AIMS

- The primary objective of this quality improvement project was to audit the total number of endometriosis cases seen at Southend University Hospital between January 2020 and December 2023 and the number of patients referred to tertiary endometriosis centres.
- The project aimed to support the development of a business case for achieving British Society for Gynaecological Endoscopy (BSGE) accreditation for Southend University Hospital as endometriosis centre.

DESIGN/METHODS

- This was a retrospective audit designed to assess the quality and comprehensiveness of care provided to endometriosis patients at Southend University Hospital.
- The study adopted a systematic approach to evaluate demographic data, clinical presentations, treatments, and outcomes, comparing them to national audit data for benchmarking purposes.
- Patient data from January 2020 to December 2023 were requested from the medical coding department. Data collection was conducted using electronic questionnaires and patient electronic records .
- A total of 321 patients were coded as having endometriosis;217 were excluded due to incorrect coding or duplication, leaving 104 patients included in the audit.
- Data analysis utilized ASRM classification for staging endometriosis and comparisons with national audit data.

CONCLUSIONS

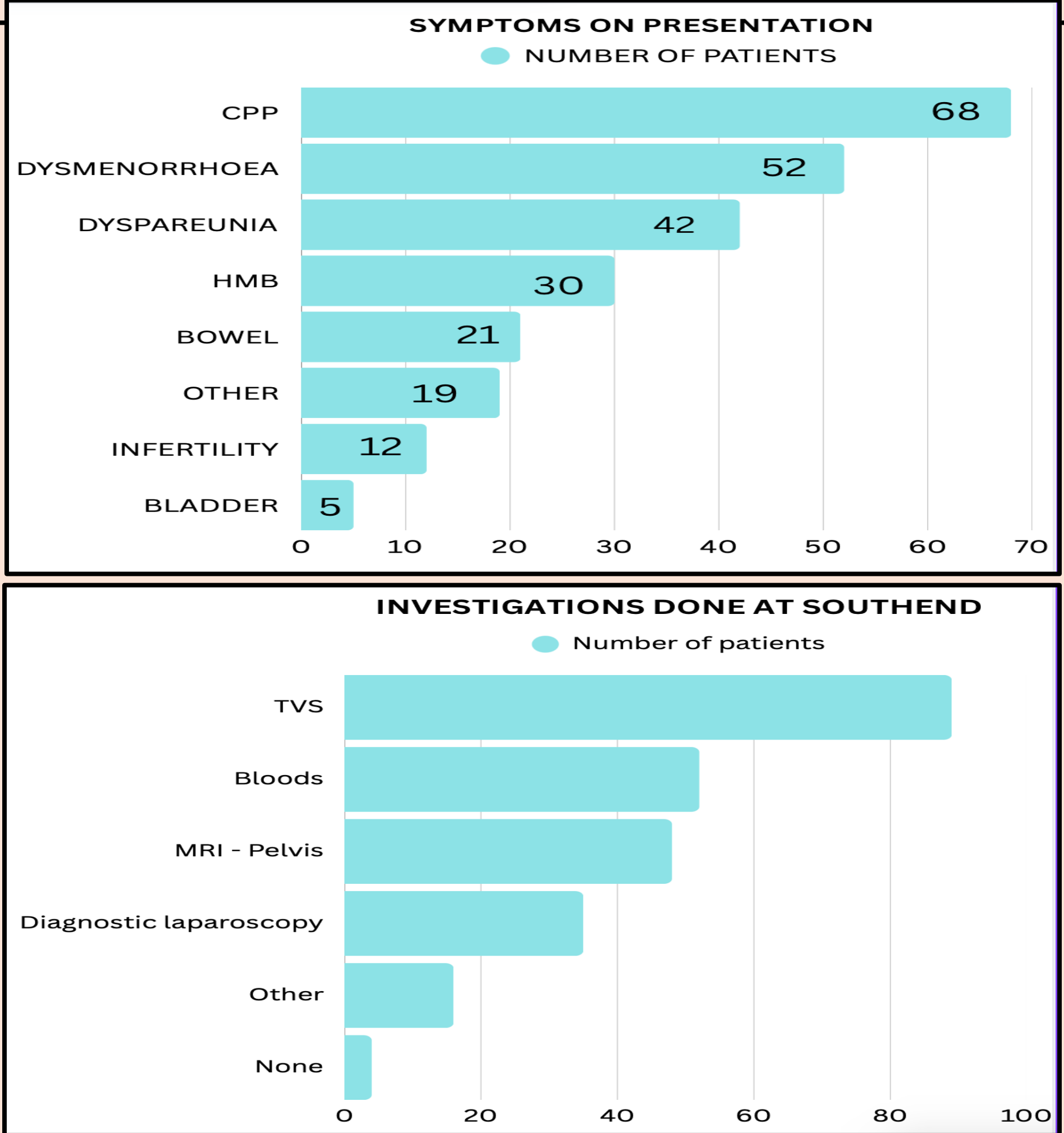
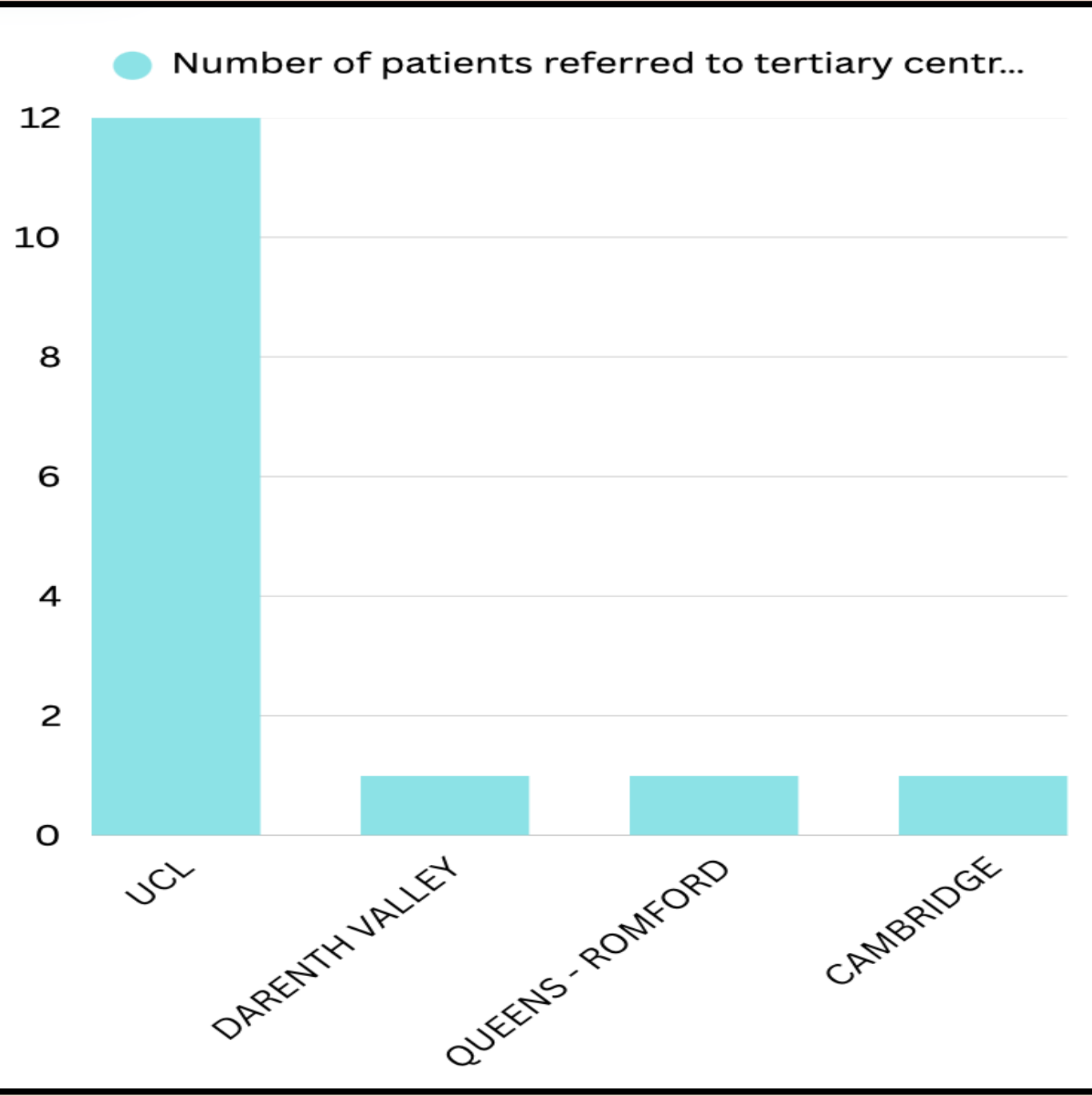
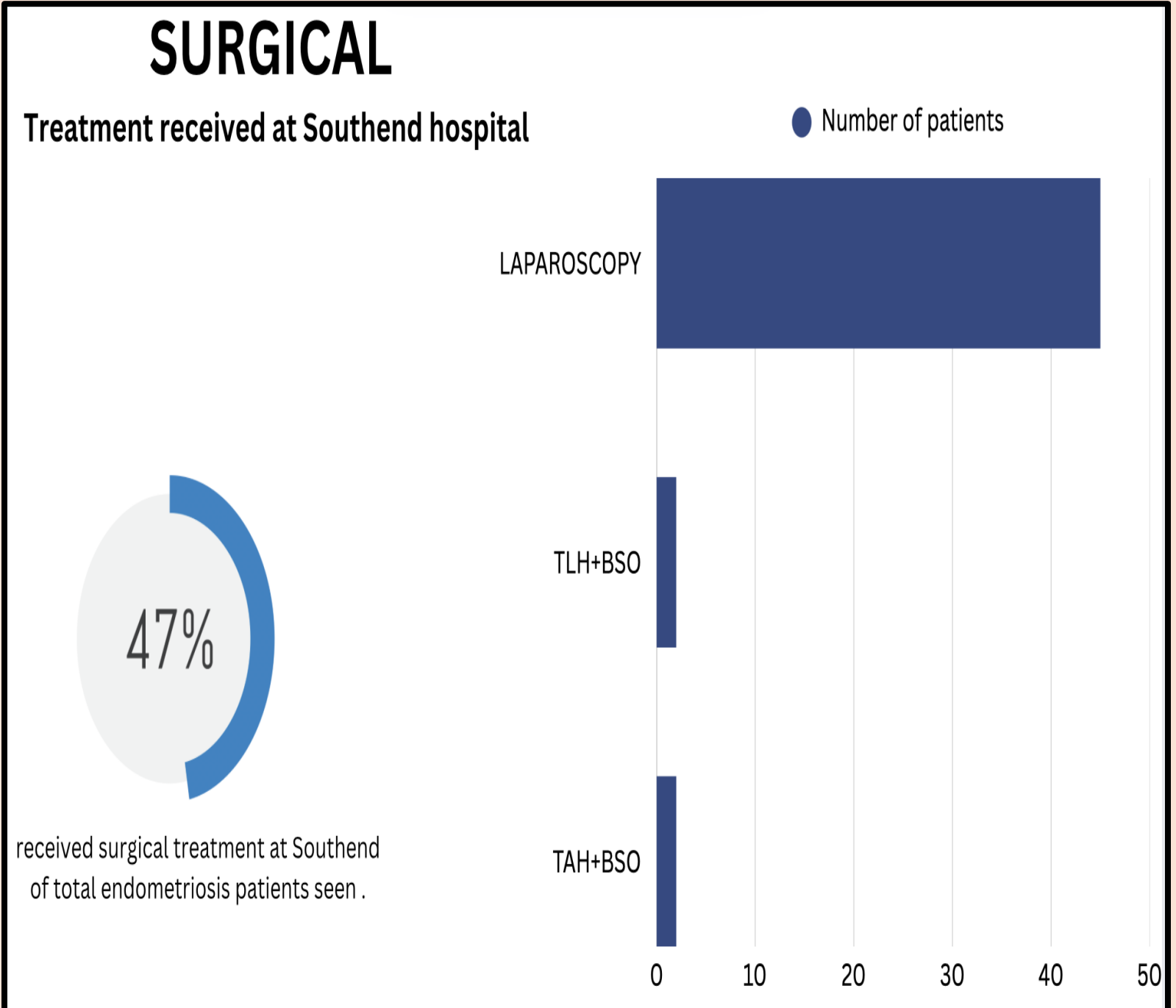
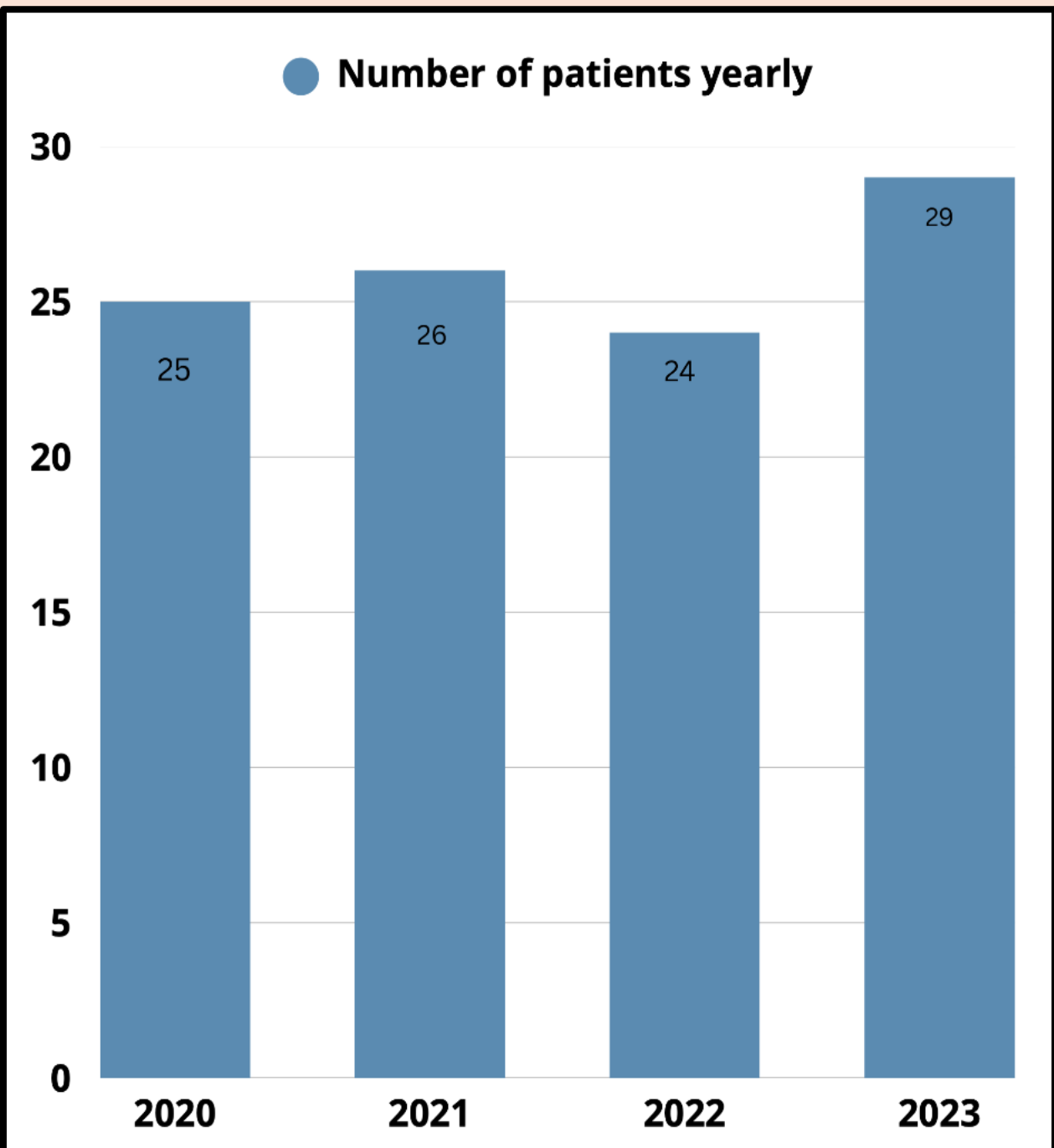
- This audit highlights significant differences in symptom profiles, staging, and treatment pathways compared to national data. It underscores the need for improved coding accuracy, earlier referrals, and enhanced local management. Findings will inform a business case for BSGE accreditation, aiming to establish Southend University Hospital as a specialized endometriosis centre and improving patient outcomes. Future research should explore pathways to reduce waiting times and optimize MDT care.

ACKNOWLEDGEMENT

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RESULTS

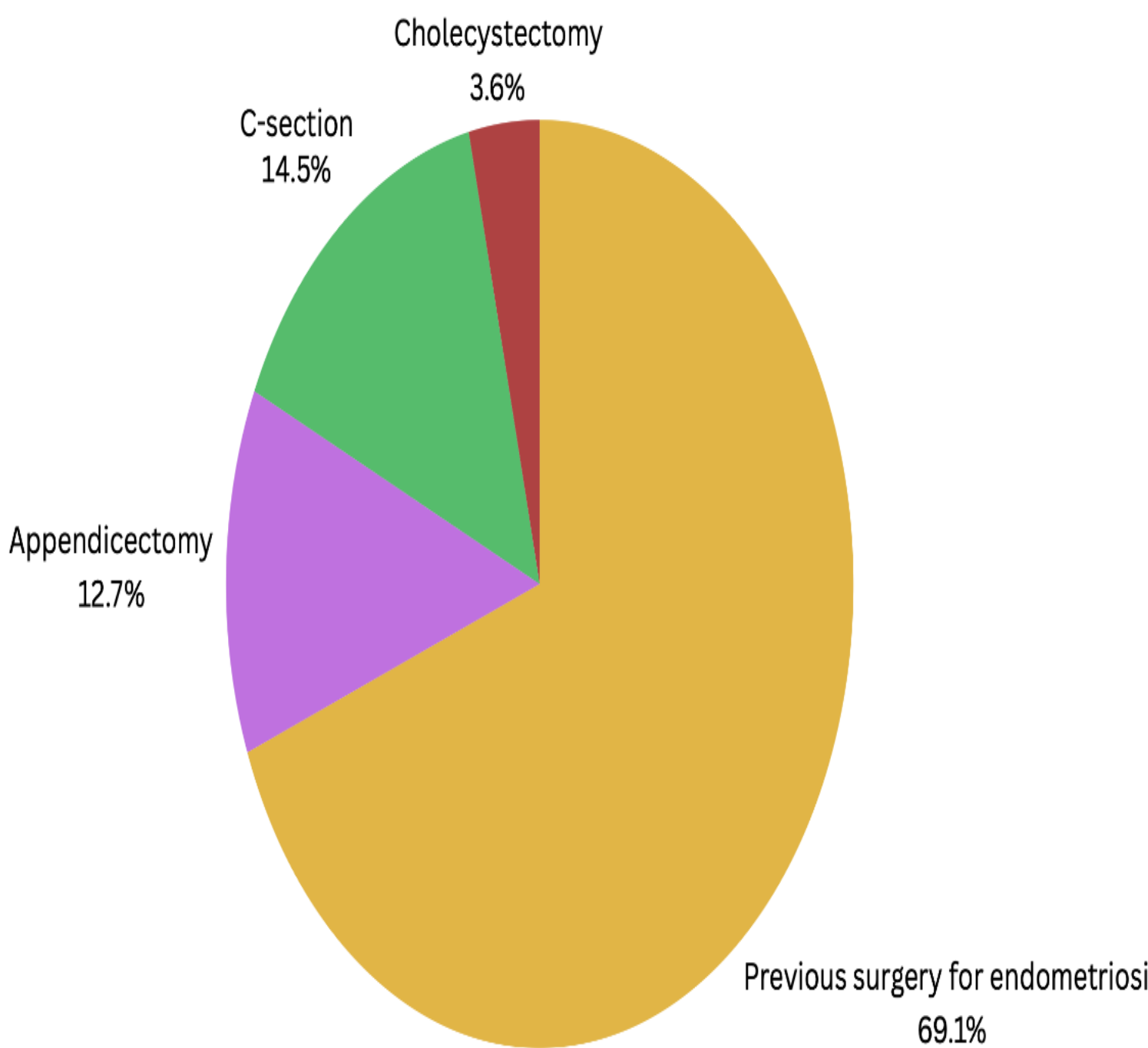
- Of the 104 patients, the mean age was 32 years, slightly lower than the national mean of 34 years. Mean BMI was 29.
- Waiting times varied, with 44% seen within 0-3 months and 17% waiting 8-12 months.
- Chronic pelvic pain was the most common symptom (65.3%),followed by dysmenorrhea (50%), and dyspareunia (40.3%), all higher than national averages.
- Past medical history commonly included PCOS (11%), IBS (5%), and mental health associations (5%).
- Previous abdominal surgeries were noted in 52% of patients, with 36% having surgery for endometriosis.
- Investigations included TVS (86%), blood tests (50%), MRI (46%) and diagnostic laparoscopy (34%).
- Stage 4 endometriosis was higher in Southend (20.1%) compared to national data (13.1%).
- While 47% received surgical treatment, 14% were referred to tertiary centres, mainly UCL.
- Referral to pain management was made for 35.6% of patients



PAST SURGICAL HISTORY

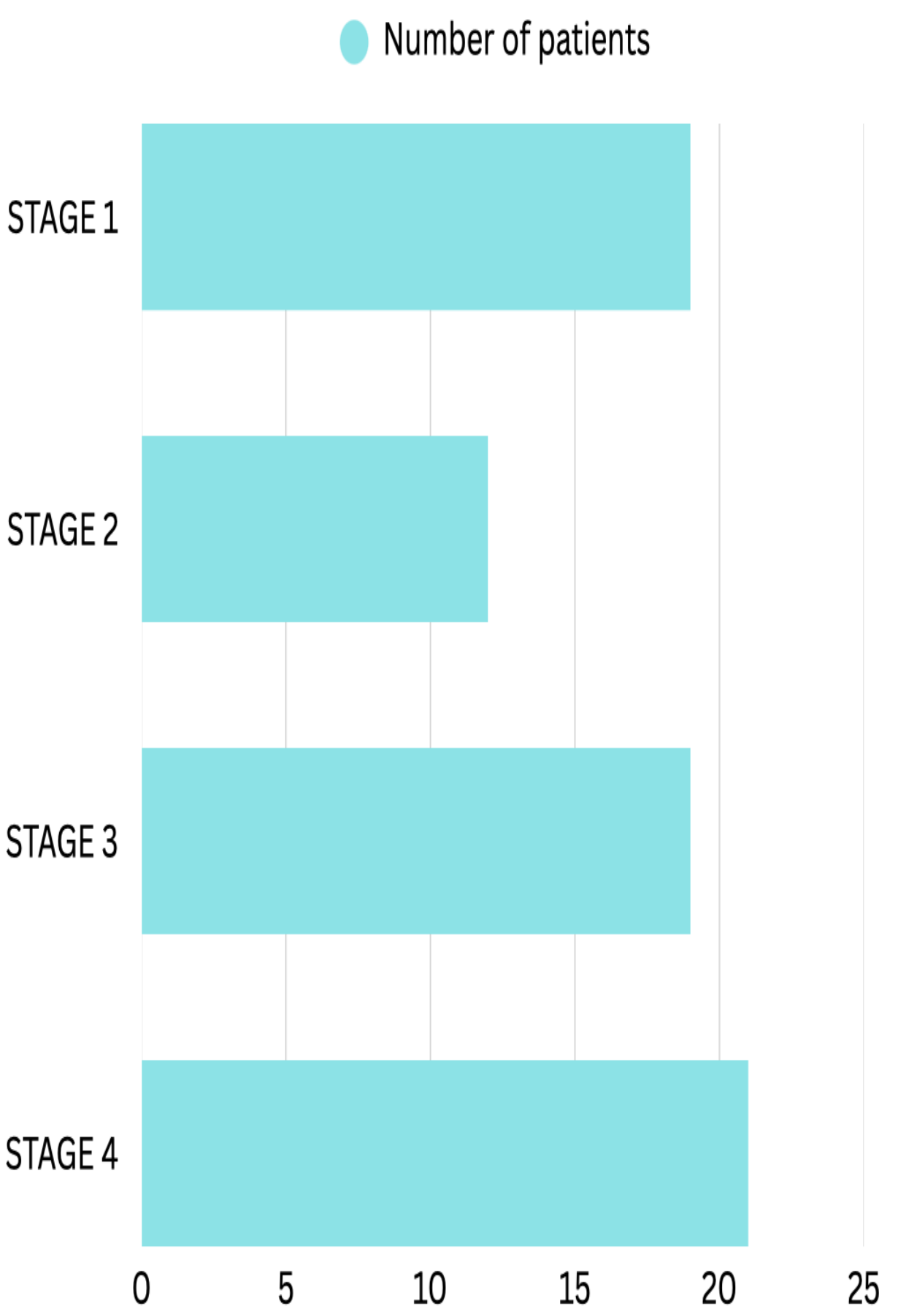
Previous abdominal surgery

PSH	Number of patients	% of total cohort (104 patients)
Total patients with previous abdominal surgery	55	52%
Previous abdominal surgery for endometriosis	38	36.5%
Appendicectomy	9	8.6%
C-section	8	7.6%
2 OR more laparoscopies for endometriosis	9	8.6%



STAGE OF ENDOMETRIOSIS

STAGE OF ENDOMETRIOSIS	SOUTHEND AUDIT	NATIONAL AUDIT
STAGE 1	18.2%	39.7%
STAGE 2	11.5%	21.8%
STAGE 3	18.2%	10.2%
STAGE 4	20.1%	13.1%
NOT KNOWN	32%	13.7%



REFERENCE

1- The National Confidential Enquiry into Patient Outcome and Death. A Long and Painful Road: a review of the quality of care provided to adult patients diagnosed with endometriosis [Internet]. London: NCEPOD; 11 July 2024. Report based on cohort February 1, 2018–July 31, 2020.

CONTACT INFORMATION

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