IMPACT OF COVID-19 VACCINATION ON MENSTRUAL DISORDERS IN WOMEN WITH ENDOMETRIOSIS

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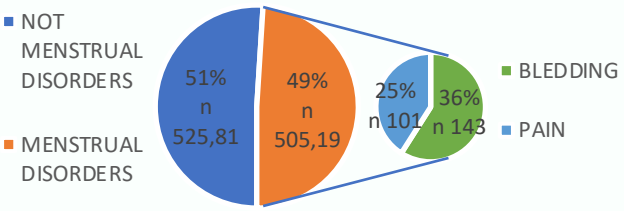
Objective: To identify whether there is an impact of COVID-19 vaccination on menstruation in fertile women with a diagnosis of endometriosis, compared with women without a diagnosis of endometriosis

Patients and Methods: Retrospective and cross-sectional descriptive observational study. Data collection through a self-conducted questionnaire (lime survey program) based on menstrual changes after vaccination(pain, bleeding and length of cycle) sent via e-mail by the hospital's computer services. Non-probabilistic recruitment in gynaecological and Advanced Practice Nurse consultation. Inclusion criteria: fertile women between 18 and 50 years of age with or without endometriosis with a complete vaccination pattern (2 or 3 doses). Exclusion criteria: menopause, single dose of vaccination. Statistical analysis using descriptive statistics and proportions.

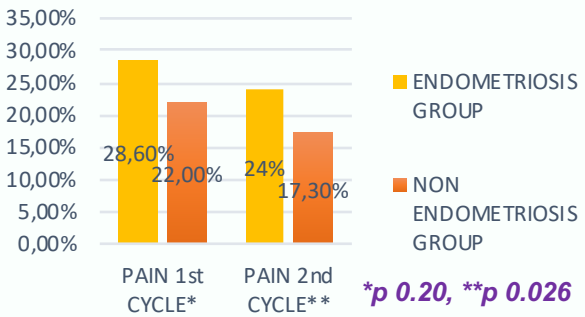
Results: 1.600 from nearly 4000 sent questionnaires were answered, of whom 1.030 met inclusion criteria. Women rate's average age was in 41,2 (± 3,9). A 49% of the total population report menstrual changes in general (25% pain, 35.5% bleeding) in the first cycle after vaccination (Graphic 1) and 28% of the total in the second cycle. Comparing women with endometriosis (n = 385) with healthy women (n = 645), statistically significant differences were found in terms of pain; women with endometriosis reported more pain in the first (28.6% vs 22% p = 0 .020) and second cycle post-vaccination (24.1% vs 17.3% p = 0.026) (Graphic 2). Hormonal treatment in women with endometriosis had a protective effect on menstrual disorders after vaccination compared to women with endometriosis without hormonal treatment on first (48,5% vs 60,3%, p = 0.020) and second menstrual cycle (23,9% vs 34,7% p=0.019) (Graphic 3).

Conclusion: To know that women with endometriosis suffer more pain than they are used to in the first and second cycle after vaccination, and even more to know that hormone treatment has a protective effect on menstrual disorders (pain, bleeding, frequency), helps to establish adherence and continuity of treatment as a method of prevention against possible menstrual disorders caused by vaccination against covid-19 of those women who are already in hormonal treatment. Strategies to the prevention of post-vaccination pain in women with or without endometriosis can be also elaborated.

Graphic 1. Menstrual Disorders in total population.

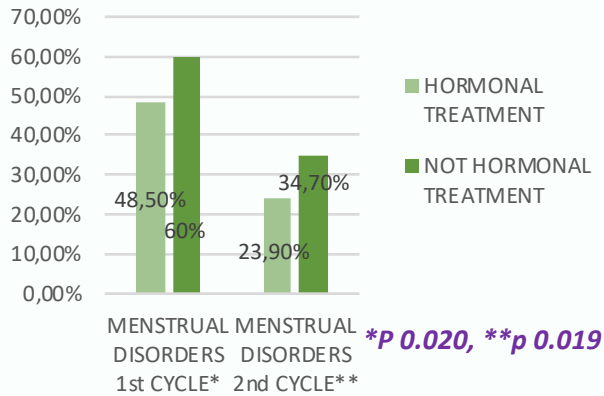


Graphic 2. Pain Menstrual Disorders in compared groups on 1st and 2nd Cycle post vaccine.



*p 0.20, **p 0.026

Graphic 3. Menstrual Disorders in Endometriosis group with or without hormonal treatment.



*P 0.020, **p 0.019