

REVIEW OF INDICATORS OF QUALITY OF LIFE AND SEXUAL FUNCTION IN WOMEN WITH MODERATE-SEVERE ENDOMETRIOSIS

Authors: Victoria Sánchez Sánchez, Ludmila Ocón Padrón, Alejandra Santana Suárez, Fidel García-Anguiano Duque, Alicia Martín Martínez.

Endometriosis Unit, Complejo Hospitalario Universitario Insular Materno-Infantil (Las Palmas, Spain)



INTRODUCTION

The measurement of health-related quality of life (HRQOL) in patients with endometriosis is a fundamental tool for raising awareness of this pathology among health personnel and society, and for facilitating the adequate provision of resources for its care.

The measurement of HRQOL presents some challenges that hinder its incorporation into clinical practice: lack of time in consultations, lack of quiet spaces for the completion of questionnaires, as well as difficulty in mastering the variety of measurement tools available, their different versions, some of them requiring complex calculation formulas for the clinician.

METHODS

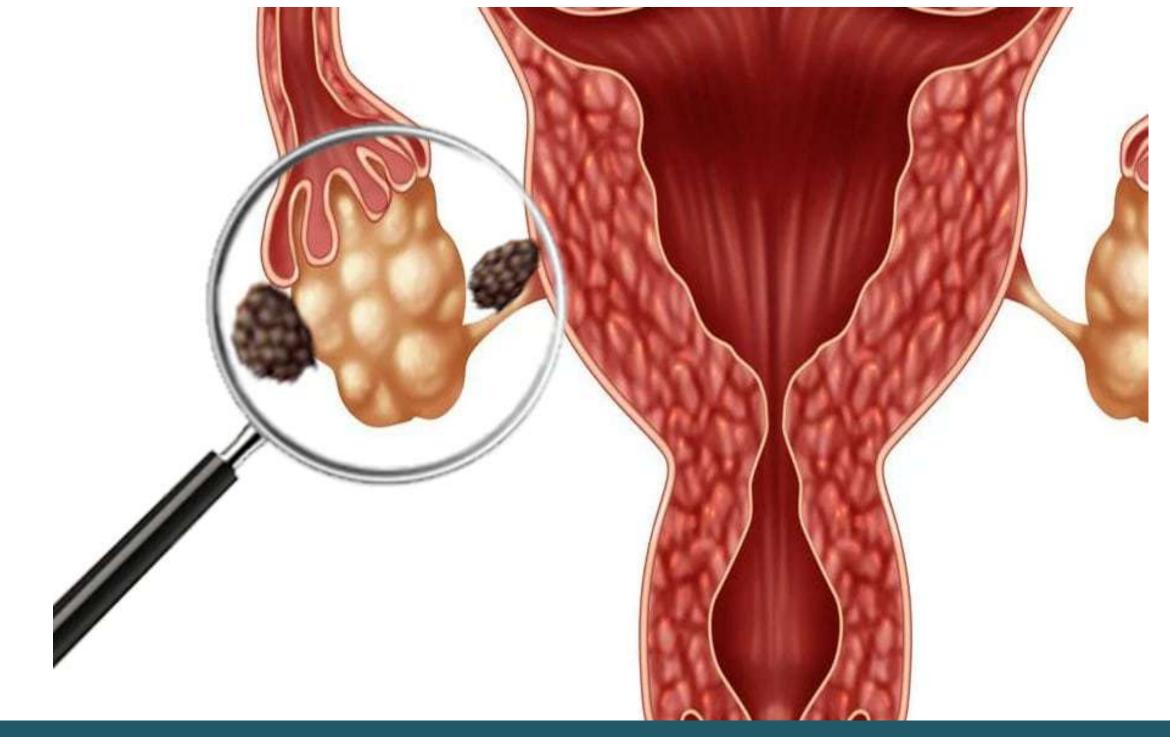
Indicators related to quality of life and sexual life were explored in all patients seen for the first time in a Specific Endometriosis Unit of a 3rd level care center in the Canary Islands between October 2018 and December 2019.

The Unit treats patients with grade III-IV disease according to rASRM score and cases of extragenital endometriosis. All patients self-completed the SF-12 v2 Health Survey questionnaire, which provides a multidimensional measure of health and is summarized in 2 summative components: physical (CSF) and mental (CSM). Patients were also asked about the impact of the disease on their sex life.

Questionnaire scores are standardized to population norm (US) values, with 50 (SD 10) being the mean of the general population; values above or below 50 should be interpreted as better or worse, respectively, than the general population.

RESULTS

A total of 129 patients were included in the study. The mean age was 40 years (25-53 years). Regarding the questionnaire, the mean score for the physical component (CSF) was 43.57 (SD 10.74), and for the mental component (CSM) was 44.06 (SD 9.94). Women between 25 and 34 years old had 45.28 points in CSF and 44.34 in CSM, between 35 and 44 years old, the results were 44.08 and 43.77, respectively, and, between 45 and 55 years old, these results were 41.9 and 44.96. Fifty-two percent had CSF and CSM scores below those of the general population. Forty-six percent of the women were at risk of depression, more than the general population (20%). 69.35% of the patients accepted that this disease negatively affected their sexual life, of these, 79% considered that the affectation was sufficient or excessive.



CONCLUSION

The important impact that endometriosis in its moderate-severe forms has on the physical, social, psychological and sexual function of women, justifies the investment in human and material resources destined to the implementation and development of specialized units on endometriosis, in which patients are treated early and effectively.

The objective documentation of health-related quality of life (HRQOL) both at baseline and after the application of the different therapeutic options is the main indicator that will determine the true value of our actions on the health of patients.