

Researchers say specialist scanning needed to help endometriosis patients

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[A review of existing research](#) shows there is a growing benefit to using specialist scanning to diagnose endometriosis. The paper is published in the journal *Fertility and Sterility*.

Endometriosis affects 1 in 9 women and those assigned female at birth. However, it takes 6.4 years to diagnose using the conventional standard of surgical laparoscopy.

Standard transvaginal and external ultrasounds can be used as a step in the [diagnosis](#) process, but there's a growing push for imaging to be used as a first tool for diagnosis.

Adelaide Endometriosis Research Group Head Professor Louise Hull, Imageno Program Manager Dr. Jodie Avery and their team are calling for increased Medicare coverage for diagnostic imaging services.

The group reviewed more than 60 published papers focusing on imaging for endometriosis diagnosis, particularly looking at specialist endometriosis [magnetic resonance](#) imaging (eMRI), [nuclear medicine](#), computed tomography (CT), endometriosis specialist transvaginal ultrasound (eTVUS) and artificial intelligence.

"Endometriosis scans take longer, and many private providers cannot perform this service due to this time and higher skill level needed, they are only reimbursed for routine scans," Dr. Avery said. "Many sonographers do not have the skills to undertake the ultrasounds either, so we do need to encourage training for female gynecological scans.

"It is great that gynecological appointments can now be extended as it will allow them to discuss other options than surgery, but we would love something similar to happen in primary health care and imaging."

The new report comes as Dr. Avery, Professor Hull and Dr. Beck O'Hara were invited to speak to the state government's select committee on endometriosis earlier this month.

"In 2022, there was a significant change to the European Society of Human Reproduction and Embryology guidelines for diagnosing endometriosis with clinicians now being encouraged to use imaging instead of surgery," Dr. Avery said.

"Medical imaging is far more accessible and provides more of a triaging situation. Some clinicians are already adopting imaging and some are starting to due to recent recommendations. We would love to see imaging used as the first line tool as it is cheaper, more accessible for women and less invasive—and most importantly much faster.

"So, we would also like to see more investment in less invasive diagnostics to support earlier diagnosis, which could assist improving care for [endometriosis](#) within the public sector, and additionally local investment in an SA Centre for Research Excellence in Endometriosis."

More information: Jodie C. Avery et al, Noninvasive diagnostic imaging for endometriosis part 1: a systematic review of recent developments in ultrasound, combination imaging, and artificial intelligence, *Fertility and Sterility* (2023). [DOI: 10.1016/j.fertnstert.2023.12.008](#)

Provided by University of Adelaide

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