

Summary and Conclusion

Endometriomas is the most frequent ovarian mass that is encountered by gynecologists. There are controversies on the pathogenesis modalities of treatment and effect on fertility.

The present study was evaluated the effect of laparoscopic fenestration and coagulation versus aspiration of ovarian endometroma on ovarian reserve.

This study carried out on 50 patients selected from the endoscopy unit department of obstetric and gynecology Benha university.

The cases were divided into two main groups:

Group I: 25 Patients for laparoscopic fenestration and coagulation.

Group 2: 25 Patients for ultrasound guided aspiration.

All patient included in this study was submitted to the following:

1. Complete history taking:

Included age, menstrual history, family history past history especially for operation and disease.

2. General examination:

To assess the vital signs and general condition Abdominal examination:

Inspection:

For contour scar, hair distribution, pigmentation.

Palpation:

For tenderness rigidity any swelling and palpated vital organs.

3. Pelvic examination:

Inspection for external genitalia for any mass, discharge, bleeding

Vaginal examination:

Vaginal examination we palpate vaginal wall for mass, ulcer, septa

4. Examination of the following:

1. Body of uterus for size, position, consistency, mobility and tenderness
2. Adnexae for mass and tenderness.
3. Dougles pouch for nodules.

5. Ovarian reserve estimation:

This was estimated for both groups one month before and after the procedure by:

Estimation of serum FSH and E₂ by Elisa DSL diagnostic system laboratories.

1. FSH and E₂ were done on day 3 of menstrual cycle.
2. FSH and E₂ were done again after one month from the procedure.

By the comparison between FSH before and after in both groups we found that there was no significant difference.

By the comparison between E₂ before and after in both groups we found that there was no significant difference.

The comparison between FSH before in both groups and after in both groups we found there was no significant difference.

The comparison between E₂ before in both groups and after in both groups we found there was no significant difference.

We found recurrence rate of cyst higher in group I than in group II

Conclusion

We concluded that US guided puncture of endometriomas is feasible transvaginally for diagnostic purpose.

Finally this procedure has been proposed as one step of therapeutic approach that included aspiration with or without medical treatment afterward