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**Method of treatment of genital endometriosis with preservation of fertility in Nigeria**

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**Introduction.** Endometriosis is a pathological process that occurs on the background of hormonal dysfunction. It is characterized by abnormal growth of endometrial cells in a location outside of the uterus. It is a common problem among women of reproductive age, especially those who have been pregnant, had an abortion or a miscarriage. It is one of the main causes of infertility in Nigerian women (about 30 %) and has no specific symptoms. It has no cure and the specific cause is unknown, but the theory of retrograde menstruation is widely accepted. Some treatments require suppression of hormones that would otherwise be needed for the woman to be able to conceive and bear children, so, this study will show how to help these women with endometriosis who want to manage their condition, and at the same time, deal with the infertility that comes with this condition.

**Materials and methods.** 14 women reported to the clinic with a problem of infertility, even though they had been sexually active without using contraceptives for more than a year. After proper investigation and history taking, they were diagnosed with genital endometriosis. These cases were studied in Efkam clinic, Nigeria, from June 2017 to August 2017. The two methods that were used were; laparoscopy to remove or vaporize the growths and In-vitro fertilization (IVF); combining sperm and eggs in the laboratory to form an embryo which was placed directly in the uterus of the women involved.

**Results.** 5 of the women were able to conceive 5 weeks after the laparoscopy and removal of growths from uterus. These 5 women had the mild form of endometriosis so this can explain why they were able to conceive after the growths or lesions were removed. They testified to the fact that not only did the laparotomy help with their infertility problem, but it also reduced the pain they normally felt in connection to the endometriosis. The rest of the women had an advanced stage of the disease and still did not conceive after the laparoscopy. They all had to further undergo IVF to improve their chances at conceiving. 6 of them were confirmed to be pregnant 2 weeks after the procedure. Apparently, it was an effective option as fertilization was done by manually combining the eggs with sperm outside of the body and then transferring the embryo into the uterus. Unfortunately, 2 of the women were still unable to conceive. This could possibly be related to the fact that they were both over the age 40 and had this problem for a very long period of time.

**Conclusion.** The use of IVF in women with endometriosis related infertility is effective for most women but still may not work for some. The use of hormones in IVF is effective to treat the infertility but other forms of hormonal therapy are not so successful. These hormones do not cure the endometriosis lesions and so, the pain may reappear after pregnancy.