



## **Deep pelvic endometriosis. Our experience after 1.800 Endosonographies.**

Lucio Rossini; Paulo Ayroza G. Ribeiro; Rogério Colaiacovo; Gustavo A. Paulo; Fernanda P. Martins.

Centro Franco Brasileiro de Ecoendoscopia (CFBEUS) & Faculdade de Ciências Médicas da Santa Casa de São Paulo, S.P., Brazil

### **Introduction:**

Endoscopic ultrasound is a useful tool in the diagnosis and staging of intestinal lesions and surrounding structures. Endometriosis is a very frequent disease. The most common structures affected by deep pelvic endometriosis are gynecologic organs, rectum and sigmoid. These structures are very well identified by a systematic intestinal endosonography, with probes that have between 5.0 to 7.5 frequency ranges. Although EUS is described as an accurate tool for the evaluation of these lesions there are no papers reporting details of the technical application and the large use of this method in the diagnosis of deep pelvic endometriosis.

### **Summary:**

Since 2001 we performed more than 1.800 intestinal endosonographies in women, suspected of deep pelvic endometriosis. A systematic intestinal endosonography approach included the study of the rectum, distal sigmoid, rectovaginal septum and pericervical spaces. Expected and unexpected endometriotic lesions of these structures were founded. Some of these lesions were biopsied by FNA. We describe the technics details of the systematic woman's pelvis evaluation by intestinal endosonography and the most frequent findings during this study.

### **Conclusion:**

Systematic intestinal endosonography can be useful in the clinical management of patients with suspected deep pelvic endometriosis.