Endometriosis as a Cause of Infertility from Iatrogenic Aetiology. An African Perspective

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Endometriosis is one of the proven causes of infertility in developed countries but it has not been widely reported as such in the tropics. The incidence of endometriosis as a cause of infertility in Nigerian females based on gynaecological practice at Ife University Teaching Hospital Complex (IUTHC), Ile-Ife, Nigeria was investigated. A retrospective study from August 1981 to May 1986 on infertility cases that had laparoscopy was carried out. Of these cases that had laparoscopy, 104/130 (80%) were for infertility, 10/130 (7.7%) for pelvic masses, 2/130 (1.5%) for suspected ectopic pregnancy, 4/130 (3%) for pelvic inflammatory disease, 7/130 (5.4%) for bilateral tubal ligation, 1/130 (0.77%) for ambiguous genitalia and 2/130 (1.54%) for suspected endometriosis. Paradoxically, the 3 cases being reported were infertile females who developed endometriosis after genital tract surgery. Our study confirms the rarity of endometriosis as an aetiological factor in infertility among black Africans. The reproductive performance of these reported cases is the subject of further investigation.

Laparoscopic Findings in Patients with Pelvic Pain and Unexplained Infertility

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This report presents our experience with laparoscopy in establishing a definite diagnosis in patients with pelvic pain and unexplained infertility. From January 1983 to August 1986 we reviewed 220 diagnostic laparoscopic procedures. Ninety-four laparoscopies were performed due to pelvic pain and 126 due to unexplained infertility. In 74 patients with unexplained infertility, fluid from the pouch of douglas was aspirated and cytologic analysis was done. A definitive diagnosis was obtained with laparoscopy in 88% of the patients with pelvic pain. Endometriosis was found in 95% of the total cases while in the cases with unexplained infertility endometriosis was found in 35%. Fluid cytology showed endometrial cells in 98.8% of the patients with macroscopic findings of endometriosis and in
28.38% of the cases without macroscopic findings. In both patient groups laparoscopy provided us with unsuspected information as well as important and sufficient data to establish diagnosis and plan treatment.