

A patient-focused glossary to help you understand key terms related to endometriosis, lab markers, hormone balance, and whole-body care. Created by EmpowHER AI to support informed, empowered decision-making.

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### 1. Medical / Anatomical Terms

- **Endometriosis:** A chronic, inflammatory condition where tissue similar to the uterine lining grows outside the uterus—often on organs like the ovaries, bladder, or bowel—causing pain, fatigue, and fertility issues.
  - **Lesion:** Abnormal tissue growth. In endometriosis, lesions are clusters of misplaced tissue that can vary in color and cause irritation or pain.
  - **Adhesion:** Bands of scar tissue that form when organs stick together, often due to chronic inflammation. Adhesions can restrict movement and cause pain.
  - **Endometrioma:** A type of ovarian cyst filled with old blood, sometimes called a "chocolate cyst," often found in advanced endometriosis.
  - **Deep Infiltrating Endometriosis (DIE):** A more severe form where endometrial tissue penetrates deep into surrounding organs or structures.
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### 2. Surgical & Imaging Terms

- **Laparoscopy:** A minimally invasive surgery using small incisions and a camera to view and treat internal organs. It's the most reliable method to confirm and remove endometriosis.
  - **Excision Surgery:** A surgical approach that removes endometriosis tissue from the root rather than burning it. It's considered more effective for long-term relief.
  - **Ablation:** A technique that burns or destroys the surface of lesions. It's less thorough than excision and may leave tissue behind.
  - **Hysterectomy:** Surgery to remove the uterus. While it may relieve certain symptoms, it doesn't eliminate endometriosis if lesions exist outside the uterus.
  - **Ultrasound:** A common imaging tool that may detect large cysts or abnormalities, but cannot rule out endometriosis.
  - **MRI:** An advanced imaging method useful for mapping deeper lesions, especially when done by a specialist.
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### 3. Symptoms & Clinical Descriptions

- **Dysmenorrhea:** Painful menstrual cramps, often severe. A hallmark symptom of endometriosis.
- **Dyspareunia:** Pain during or after intercourse, sometimes due to lesions or pelvic floor tension.
- **Chronic Pelvic Pain:** Ongoing lower abdominal pain that may be constant or cyclic.
- **Bloating ("Endo Belly"):** Abdominal swelling and pressure, often fluctuating with the cycle.
- **Fatigue:** Persistent tiredness not resolved by rest, often due to inflammation or hormonal imbalance.
- **GI Symptoms:** Digestive discomfort like bloating, nausea, constipation, or diarrhea—especially around the menstrual cycle.
- **Cycle Irregularity:** Periods that are abnormally heavy, light, or unpredictable, often due to hormonal disruptions.

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## 4. Hormonal & Treatment Terms

- **Hormonal Suppression:** Treatments that reduce or pause menstrual cycles to ease endo symptoms, like birth control or hormonal IUDs.
- **GnRH Agonist/Antagonist:** Medications that reduce estrogen levels dramatically to manage severe symptoms, with potential side effects.
- **Progestin Therapy:** A hormonal approach that can thin the uterine lining and ease bleeding and pain.
- **Aromatase Inhibitor:** A treatment that lowers estrogen production and may be used in resistant endometriosis cases.
- **Add-Back Therapy:** Low-dose hormones added to reduce side effects of strong hormone suppression.
- **Hormonal IUD:** An intrauterine device that releases progestin to reduce bleeding and cramping.
- **Menopause (Natural or Surgical):** The end of menstrual cycles. Symptoms may shift but endometriosis can still persist.

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## 5. Multi-System Impact Terms

- **Pelvic Floor Dysfunction:** Muscle imbalances in the pelvic floor that can cause pain, urgency, or pressure.
- **Central Sensitization:** A heightened pain response from the nervous system, often seen in chronic conditions.
- **Bladder Pain Syndrome (IC):** A condition causing bladder pain and frequent urination, often confused with endometriosis.
- **Histamine Intolerance:** Difficulty breaking down histamine, which can lead to symptoms like flushing, migraines, or GI upset.
- **SIBO:** Small intestinal bacterial overgrowth, linked to bloating and food sensitivities. Sometimes overlaps with endo.
- **Autoimmune-like Response:** Endometriosis involves immune dysregulation, behaving like an autoimmune condition in some ways.

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## 6. Clinical Navigation & Advocacy Terms

- **Shared Decision-Making:** A collaborative care approach where providers and patients work together to decide the best path forward.
- **Multidisciplinary Team:** A care team with multiple specialties—like GI, pain management, and gynecology—for comprehensive treatment.
- **Specialist Referral:** Getting referred to a provider with advanced training in treating endometriosis, such as an excision surgeon.
- **Second Opinion:** Consulting another provider for confirmation or new insight into diagnosis or treatment.
- **Care Plan:** A personalized outline of treatment goals, interventions, and follow-up tailored to your symptoms.
- **Self-Advocacy:** Taking an active role in your healthcare—asking questions, tracking symptoms, and voicing your needs.