ENDOMETRIOSIS UK

DONATIONS

& BSGE/ESHRE GUIDELINES



WORLDWIDE ...

Endometriosis patients are frustrated, angry and disheartened with the lack of Endometriosis care in their countries. Main charities, and organisations all claim to want the best for Endometriosis patients however, how much is actually done to improve the care for people with Endometriosis? Where is the money from organisations spent? Are the guidelines sufficient enough? For a disease that is lifelong chronic illness, affecting 190 million people worldwide you would think so.

Endometriosis patients are exhausted at the lengthy journey of approximately 7-10+ years to receive a diagnosis.

A journey full of gaslighting, medical trauma, hormone pushing, wrong information, the refusal of tests unless taking hormone contraception, told symptoms are anxiety or depression and that the symptoms are not real.

Exhausted with the lack of mental support and dangerous surgeries that are not performed by Endometriosis Specialist's.

Looking at the UK Government website yearly reports for the UK's leading Endometriosis charity, we can take a deeper look into where some of the donations really come from.

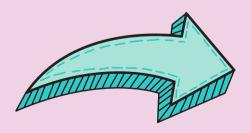
CHANGETHEGUIDELINES

This is not against anyone who works for Endometriosis UK, volunteers, support workers, ambassadors or anyone associated with Endometriosis UK.

DONATIONS



BSGE/ESHRE GUIDELINES





DONATIONS

endometriosis-uk.org

Donate today and help us provide vital support services, reliable information and a community for those affected by endometriosis.

Last year, we were able to support over **50,000 people** who needed our help.

We want to be able to help more.

We receive minimal funding for the work we do and are financed almost entirely through donations and annual membership subscriptions.

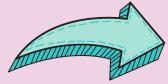
Õ

Image from Endometriosis UK Website - Donation page.

Under the donations section on the Endometriosis UK Website it is implied that they receive minimal funding and are financed almost entirely through donations and annual membership subscriptions. This is all that is mentioned on the Endometriosis UK Website with regards to donations.

Let's see who actually donates to Endometriosis UK.





DONATIONS

lometriosis UK Annual Report 2019/20

ENDOMETRIOSIS UK

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31ST MARCH 2020

GRANTS AND DONATIONS

£	£
30,000	50,000
2,800	25,200
15,000	-
98,000	-
-	15,000
-	15,000
-	2,000
145,800	107,200
175,557	118,937
321,357	226,137
	30,000 2,800 15,000 98,000 - - - - 145,800 175,557

ACTIVITIES FOR GENERATING FUNDS

•		
Income		
Challenge Events	54,324	57,407
Membership fees	14,535	10,561
Publications and Events	4,097	18,601
Other Fundraising Activities (See Note below)	107,594	99,382
	180,550	185,951
Expenditure		
Challenge Events	9,136	11,922
Costs of generating voluntary income	8,054	10,334
Other	48,788	23,548
	65,978	45,804

Note: Other Fundraising Activities represent members and supporters raising funds on behalf of the charity.

LETS EXPLORE SOME OF THESE COMPANIES...

- HOLOGIC
- GEDEON RICHTER
- BAYER













Images from www.hologic.com

Hologic is a company who creates & makes multiple different ablation devices used for all different kinds of procedures & Surgery.

Hologic have donated to Endometriosis UK multiple times over the years. Here they have Donated/Granted £50,000 in 2019 and £30,000 in 2020 to Endometriosis UK.

	2020	2019
	£	£
Hologic	30,000	50,000
Wellcome Trust	2,800	25,200
Scottish Government	15,000	-
Endometriosis Trading Ltd	98,000	-
Gedeon Richter	-	15,000
Bayer	•	15,000



WHY DOES THIS MATTER?

Upon the release of the updated BSGE/ESHRE guidelines for 2022 on Endometriosis (which were last updated in 2014) Ablation Surgery is still the preferred method over Excision surgery with a highly trained Endometriosis Specialist.

54.	gical treatment		
24	It is recommended to offer surgery as one of the options to reduce endometriosis-associated pain. $ \\$	⊕⊕○○	Strong recommendation
25	When surgery is performed, clinicians may consider excision instead of ablation of endometriosis to reduce endometriosis-associated pain.	⊕⊕○○	Weak recommendation

Medical studies and Endometriosis Specialist's have often described Excision Surgery as the Gold Standard, so why does the BSGE/ESHRE Guidelines suggest it is a weak recommendation? Could financial influence be the reason?

"Laparoscopic excision is currently the 'gold standard' approach for the management of endometriosis."

"Large, long-term, prospective studies and a placebo-controlled, randomized, controlled trial suggest that laparoscopic excision is an effective treatment approach for patients with all stages of endometriosis."

Current Opinion in Obstetrics and Gynecology: August 2004 - Volume 16 - Issue 4 - p 299-303 doi:10.1097/01.gc0.0000136496.95075.79







	2020	2019
	£	£
Hologic	30,000	50,000
Wellcome Trust	2,800	25,200
Scottish Government	15,000	-
Endometriosis Trading Ltd	98,000	-
Gedeon Richter		15,000
Bayer	• • • • • • • • • • • • • • • • • • •	15,000

Bayer has donated multiple times over the years, here they donated £15,000 to Endometriosis UK in 2019.

They manufacture the Mirena Coil.

Mirena is an intrauterine device (IUD) manufactured by Bayer Healthcare, intended to prevent pregnancy for up to five years and can be used by both women who have had and who have not had children. It is also approved to treat heavy menstrual bleeding in women who wish to use an IUD for their birth control method.

screen grab from google -www.drugdangers.com

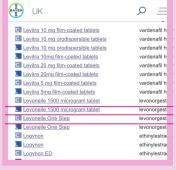
The Very thing that is recommended as a "treatment" Option for Endometriosis.

Under treatment options on Endometriosis UK Website.

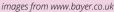


They also make the Mirena coil Inserter & other hormonal contraceptions including Levonelle.









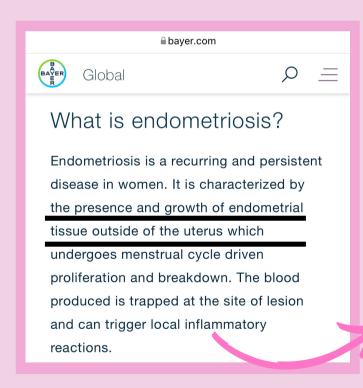


BAYER 2

The same company with multiple lawsuits due to side affects and organ perforation.

Mirena lawsuits accuse Bayer Pharmaceuticals of hiding side effects and making a defective intrauterine uterine device (IUD). Women blame the birth control device for organ perforation, dislodging from the uterus and causing pressure buildup in the skull. Bayer offered to settle some perforation lawsuits for \$12.2 million.

Image from www.drugwatch.com



Screenshot taken from Bayer's website, with the incorrect definition of Endometriosis.

The correct definition is Endometrial- Like-Tissue -"Tissue similar to the lining of the womb" - NHS.UK







		ENDOMETRIOSIS UK	
	F	NOTES TO THE FINANCIAL STATEMENTS OR THE YEAR ENDED 31ST MARCH 2018	
3.	GRANTS AND DONATIONS	2018	2017
		£	£
	Hologic	5,000	
	Edith Murphy Foundation	4,000	
	Albert Hunt Trust	1,000	
	Department of Health	· ·	65,4
	Garfield Weston		15,0
	Takeda		14,2
	NHS Manchester		5,1
	Donation for Research		7,5
		10,000	107,2
	Other Donations	72,027	56,5
		82,027	163,7

ENDOMETRIOSIS UK ANNUAL REPORT 2018/2017.

Takeda is a name that is also mentioned multiple times throughout all Endometriosis UK Financial reports so who are they?

Takeda is a multi billion Japanese multinational pharmaceutical company, with partial American and British roots. It is the largest pharmaceutical company in Asia and one of the top 20 largest pharmaceutical companies in the world by revenue.

BUT WHAT IS REALLY INTERESTING IS WHAT TAKEDA PRODUCES AND IS INVOLVED WITH...





TAKEDA 2

Takeda is the manufacturer of Lupron (Leuprorelin Prostap)

Takeda and AbbVie share Lupron, the grandfather product in the top-selling cancer products. It has been around since 1986. Sanofi and Astellas share Eligard, which ca

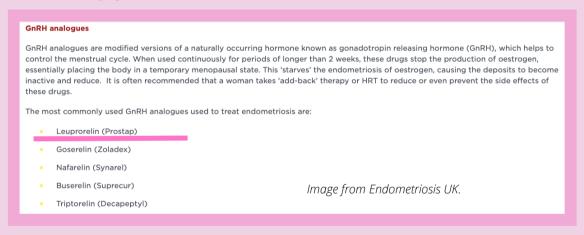
Who owns Lupron?

Where is the drug Lupron manufactured?

The Osaka plant of the Takeda Chemical Industries, Ltd. is the site of drug product, leuprolide manufacture and is located in the northwestern part of Osaka City. It is situated approximately 650 yards from the Yodo river and is more than 0.07 square miles in area.

Image from www.accessdata.fda.gov

Lupron is suggested as a treatment for Endometriosis.



The BGSE/ESHRE Guidelines also strongly recommend GnRH Agonists (Such as Lupron) to reduce Endometriosis pain, although evidence is limited regarding dosage or duration of treatment.



TAKEDA 3

ENDOMETRIOSIS UK

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31ST MARCH 2018

13. SHARE CAPITAL

The company is limited by guarantee and therefore does not have any share capital. The liability of the members on the winding up of the company will not exceed £1.

14. RESTRICTED FUNDS

	Balance 31/03/17 £	Incoming Resources £	Resources Expended £	Transfers £	Balance 31/03/18 £
Takeda	14,200				14,200
Donation for Research	7,500	-	(7,500)	-	-
	21,700	-	(7,500)	-	14,200

Restricted funds represent donations and grants restricted for use on particular areas of the charity's work.

The grant received from Takeda for production of a new information leaflet which is currently being developed.

ANNUAL REPORT 2018/2017.

Here it is stated that the grant received from Takeda in 2017 and again the same for 2020 and 2021 (see images below) was for the production of a new information leaflet which was currently being developed.

I am unable to find said leaflet mentioned above.

However, If a leaflet/information guide was produced, it would be sponsored by the company who produces Lupron. Again, a treatment that Endometriosis patients are offered. Therefore, would this information be in the patients best interests or financially influenced by Takeda?

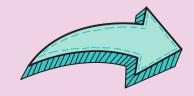
Our funding from Takeda is to update the *Living with Endometriosis* booklet, which is being update and will be published in 2020.

Takeda

Our funding from Takeda is to update the Living with Endometriosis booklet, which is being updated and will be published in 2021.

Takeda is also thanked throughout multiple Endometriosis UK revenue reports over the years.





GEDEON RICHTER

	2020	2019
	£	£
Hologic	30,000	50,000
Wellcome Trust	2,800	25,200
Scottish Government	15,000	-
Endometriosis Trading Ltd	98,000	-
Gedeon Richter	-	15,000
Bayer	-	15,000

Gedeon Richter donated £15,000 to Endometriosis UK in 2019, so who are they?

Gedeon Richter is a European innovationdriven speciality pharmaceutical company with products distributed in more than 100 countries worldwide. We are one of the few companies in the world to offer a comprehensive gynaecological portfolio.

Image from Gideonritcher.co.uk

They produce a variety of different kinds of hormonal contraceptions.

Gedeon Richter UK Ltd. ("Gedeon Richter") today announced that the Medicines and Healthcare Products Regulatory Agency (MHRA) has granted a UK licence for Benilexa® One Handed (levonorgestrel IUS), as a type of contraception and for the treatment of heavy menstrual bleeding in women of fertile age. This means that healthcare professionals and eligible women now have access to a reloadable, single-handed IUS for the first time on the NHS in the UK. The list price of levonorgestrel IUS is £71.

Image from PCWF.COM





WHAT ARE THESE GRANTS AND DONATIONS USED FOR?

This is stated in the Financial annual report for Endometriosis UK year 2018/2019. - "We were able to deliver the RCGP Menstrual wellbeing project thanks to generous educational grants from - Hologic, Bayer & Gedeon Richter"

✓	Standard Life, our first major corporate partner
✓	Wellcome Trust - Public Engagement Fund grant
✓	Scottish Government – Section 10 Annual Grant Funding Scheme
✓	Takeda
✓	Hospital Saturday Fund
grants	re able to deliver the RCGP Menstrual Wellbeing Proiect thanks to generous educational from:
	Helesia ananima anatana dan
/	Hologic - premium grant provider
<u> </u>	Bayer
\ \ \	
\ \ \	Bayer

Many women report that the physical, psychological and social impact of menstrual dysfunction is often underestimated by primary care clinicians, employers, schools and colleagues. This leaves them feeling unsupported and embarrassed to ask for help or treatment, at a time when they are often exhausted by the physical problems caused by the condition.

Even when their symptoms are recognised, the process to diagnosis and the standards and availability of treatment and management vary significantly. Length of time to diagnosis – and so to any form of treatment – can not only prolong suffering but risk the development of longer term consequences. This menstrual wellbeing project recognises the need to support GPs and practice staff in delivering a better quality and level of care to their patients and increase awareness and knowledge of menstrual dysfunction, including tips and tools to help with diagnosis and treatments and resources for patients.

This project, led by Dr Anne Connolly and funded by **Endometriosis UK**, who are working closely with a variety of key stakeholders, including the Royal College of Obstetricians and Gynaecologists at the RCGP Patient and Carer Participation group, to produce resources that are evidence based and appropriate for the care women want and deserve.

On the RCGP website, it talks about the Menstrual Wellbeing Project and what it does. "It is funded by **Endometriosis** UK who are working closely with a variety of stakeholders" Yet it never mentions who these stakeholders are who are financially involved and what they manufacture.



THE MENSTRUAL WELLBEING TOOLKIT.

Aims of the project

The focus of this project is to help primary care clinicians recognise the symptoms of menstrual dysfunction and understand the common causes, investigations and management options.

"The focus is to help primary care clinicians recognise the common causes, investigations and management options"

"GPs play a vital role in identifying menstrual issues and supporting these patients to receive a diagnosis and treatment, in conjunction with secondary care wherever appropriate. We are delighted to be working in partnership with the RCGP to provide resources to help GPs, and look forward to seeing reductions in diagnosis time for endometriosis and other menstrual conditions."

Endometriosis is still being recognised as a menstrual disease and not an all over body one.

http://nezhat.org/endometriosistreatment/history-of-endometriosis/

"To provide rescources to help GPs and look forward to seeing reductions in diagnosis time for Endometriosis"

Endometriosis UK has been able to fund this RCGP Spotlight Project due to generous grants received from Hologic (premium grant provider), Bayer and Gedeon Richter, for which we are very grateful. These organisations have provided funding for the project but have had no further input into the project or materials that are produced.

HOLOGIC The Science of Sure





On the Endometriosis Uk Website under the Wellbeing toolkit page at the bottom it does mention these companies with links to their websites. However, it does not ever clarify what they produce.

It also states that "these organisations have provided funding but have no further input into the project or materials that are produced." - but how do we know this?





THE MENSTRUAL WELLBEING TOOLKIT 2

elearning.rcgp.org.uk

Women's health toolkit

This Women's Health Hub is categorised into sections best representing the needs of women at different stages of their lives.

Top tips for managing endometriosis in primary care

The Endometriosis section in this tool kit, that helps G.P's is just 10 bullet points, that is all. The two points that stand out are 6 & 7

elearning.rcgp.org.uk

6. Simple analgesia or combined hormonal contraception or desogestrel should be commenced at the first visit. An understanding of imminent fertility requirements assists treatment choices.

Bullet point 6
suggests that
"Combined Hormonal
contraception or
desogestrel should
be commenced at the
first visit."

As per the Endometriosis uk website, which claims that the Pharmaceuitical organisations (who have financial imput to this toolkit for G'Ps) have no further input.

However, it poses the question why hormonal contraceptions should be commenced straight away at the first visit? if they have no further input into the project why is there no mention of an Endometriosis Specialist, instead just Hormone Contraception which is what some of these companies manufacture.





THE MENSTRUAL WELLBEING TOOLKIT 3

≜ elearning.rcgp.org.uk

7. On review the use of continuous hormonal treatment (any hormonal contraception) should be commenced to control symptoms if the diagnosis of endometriosis is likely. Signposting to patient information for support i.e. Endometriosis UK is recommended.

Bullet point 7 suggests that the use of Hormonal treatment should be used to control symptoms of Endometriosis & to signpost patients to Endometriosis UK for support.

In this entire health toolkit for managing Endometriosis Care that is sent to G.P's, refferal to an Endometriosis Specialist or Excision Surgery are never mentioned. Secondary care is mentioned but it is unclear as to what that actually means.

A diagnostic Laparoscopy is currently the only way to detect the presence of Endometriosis due to taking biopsys to send for testing. So why is this not mentioned?

Signposting patients to Endometriosis Uk for information is great but a lot of their vital informational documents have not been updated for over a decade!

The majority of the documents have not been updated since 2010, 2012 and some being 2014.

Helpline: 0808 808 2227

Last updated April 2012 (For office use only)

© Endometriosis UK. Suites 1 & 2, 46 Manchester Street, London, W1U 7LS

t: 020 7222 2781 information@endometriosis-uk.org www.endometriosis-uk.org

providing support increasing understanding

Endometriosis UK is a registered charity No. 1035810. Company Limited by Guarantee No: 2912853 5





BSGE/ESHRE GUIDELINES





BSGE/ESHRE GUIDELINES

What are they and who are BSGE & ESHRE?

As quoted on the BSGE website - "The guidelines offers best practice advice on the care of women with endometriosis, including recommendations on the diagnostic approach and treatments for endometriosis for both relief of painful symptoms and for infertility due to endometriosis."

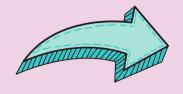
For those of you who don't know ESHRE stands for -European Society of Human Reproduction and Embryology. They come together with the BSGE to create the Endometriosis Guidlines.

BSGE stands for The British Society for Gynaecological Endoscopy and it "exists to improve standards, promote training and encourage the exchange of information in minimal access surgery techniques for women with gynaecological problems."

BSGE also claims on their website that "The BSGE exists not only to serve its members, but also to promote knowledge and understanding of the endoscopic approach to diagnosis and treatment to our patients, the public and those that form healthcare policy so that we can make a difference to women's health and wellbeing."

Quotes directly from the BSGE Website.





BSGE/ESHRE GUIDELINES

The guidelines were last updated in 2014, in 2022 they were announced as new guidelines and Endometriosis patients were waiting in anticipation for the change that is so desperately needed. Only that change never arrived, in fact since 2014 barely anything has improved.

For example, the guidelines state that no mental health care is needed for Endometriosis patients, Yet a 2019 BBC survey collected that about half of endometriosis sufferers reported that having the condition led them to have suicidal thoughts.

Follow-up and psychological support should be considered in women with confirmed endometriosis, particularly deep and ovarian endometriosis, although there is currently no evidence of benefit of regular long-term monitoring for early detection of recurrence, complications, or malignancy.

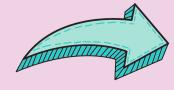
000e

Weak recommendation

Image from the BSGE/ESHRE guidelines

The guidelines continue to strongly recommend hormonal contraceptions which leads to people often getting refused testing and further investigations for their symptoms without being on any form of hormonal contraception for months first.





HOW ARE THE GUIDELINES CREATED?

Disclaimer from the BSGE/ESHRE Guidelines

DISCLAIMER

This guideline represents the views of ESHRE, which were achieved after careful consideration of the scientific evidence available at the time of preparation. In the absence of scientific evidence on certain aspects, a consensus between the relevant ESHRE stakeholders has been obtained.

"In the absence of scientific evidence, a consensus between the relevant ESHRE stakeholders have been obtained" - So basically if no scientific evidence is present then the stakeholders all get to contribute and decide the outcome.





WHO ARE THE STAKEHOLDERS?

Representatives of professional organisations					
Organisation	Country	Representative			
The Centre for Reproduction Research, De Montfort University, UK	UK	Caroline Law and colleagues			
FERRING PHARMACEUTICALS	Denmark				
Gedeon Richer, Myovant and Pfizer		Thierry Schulmann			
Department of Fertility and Gynecology, UMC Utrecht	The Netherlands				

AND WHO HAS FINANCIAL LINKS?

Society. C.T. reports grants from Merck SA; Consulting fees from Gedeon Richter, Nordic Pharma and Merck SA; speaker fees from Merck SA, all paid to the institution; and support for meeting attendance from Ferring, Gedeon Richter and Merck SA. The other authors have no conflicts of interest to declare.





FINANCIAL LINKS

Bayer Healthcare is also one of the sponsors of the BSGE/ESHRE Guidelines.

Conflict of interest

Consultancy: ObsEva (IDDM)

Myovant

Research Grant:

Bayer Healthcare

MDNA Life Sciences

<u>& WHO HAS SOME FORM OF</u> <u>FINANCIAL INVOLVEMENT.</u>

The most shocking part is that as well as Bayer, and Gedoen Richter a few more companies are also listed under the funding/competing interests section, including...

Society. C.T. reports grants from Merck SA; Consulting fees from Gedeon Richter, Nordic Pharma and Merck SA; speaker fees from Merck SA, all paid to the institution; and support for meeting attendance from Ferring, Gedeon Richter and Merck SA. The other authors have no conflicts of interest to declare.

Gedeon Richter
(Manufactures
Hormonal Contraception)

BUT ALSO...

Endometriosis Society. E.S. reports grants from National Institute for Health Research UK, Rosetrees Trust, Barts and the London Charity; Royalties from De Gruyter (book editor); consulting fees from Hologic; speakers fees from Hologic, Johnson & Johnson, Medtronic, Intuitive, Olympus and

Hologic, The company which manufactures the Ablation tool for Endometriosis Surgery.

www.academic.oup.com

DO THESE NAMES SOUND FAMILIAR?
ALL THESE COMPANIES ALSO DONATE TO
ENDOMETRIOSIS UK.



CONFLICT OF INTEREST?

It is strongly recommended that Hormonal contraception as the first point of treatment for Endometriosis in the updated BSGE/ESHRE Guidelines, Guidelines which Bayer has a financial link to.



In adolescents with endometriosis, clinicians should consider postoperative hormone therapy, as this may suppress recurrence of symptoms.

Often Patients are refused tests and further investigations for their Symptoms unless being on any form of contraception for months first. Leading to lengthier diagnosis times and years of suffering.

An extract from a letter received from a Gynecologist.

although there is possibility there is endometriosis involved in her pain but at this point we would not be considering any diagnostic procedure with regards to that as Sarah is not on any contraception or hormonal treatment which is the first line.



ESHRE GUIDELINE CONNECTIONS TO ENDOMETRIOSIS UK.

Another connection to Endometriosis Uk is below.

Here are the Members of the Endometriosis Guideline Core group for the ESHRE/BHGE Guidelines.

ESHRE guideline: endometriosis 6

The members of the Endometriosis Guideline Core Group,

Christian M Becker ™, Attila Bokor,

Oskari Heikinheimo, Andrew Horne, Femke Jansen,

Ludwig Kiesel, Kathleen King, Marina Kvaskoff,

Annemiek Nap ... Show more

Author Notes

Below is the Medical Advisory Panel for Endometriosis UK.

Medical Advisory Panel

Arvind Vashisht, Consultant Gynaecologist, University College London Hospital

Kirana Arambage, Consultant Gynaecologist, John Radcliffe Hospital, Oxford

Professor Christian Becker, Consultant Gynaecologist, John Radcliffe Hospital, Oxford

Professor Andrew Horne, Professor of Gynaecology and Reproductive Sciences, Edinburgh University

Shaheen Khazali, Consultant Gynaecologist, Ashford & St Peter's NHS Foundation Trust

Dr Uma Marthi, General Practitioner with special interest in women's health, Rochdale

Dr Veena Rao, General Practitioner with special interest in women's health, Cumbria

Fevzi Shakir, Consultant Gynaecologist, Royal Free Hospital

Dr Katy Vincent, Associate Professor, Senior Fellow in Pain in Women, John Radcliffe Hospital, Oxford

The same two members on the ESHRE Guidelines for Endometriosis are also on the Medical Advisory Panel for Endometriosis

UK.



ESHRE CONNECTIONS.

Endometriosis UK also uses www.endometriosis.org for information on Hormonal treatments for their website.

endometriosis-uk.org

Mirena Coil

Progestogens

GnRH analogues

Testosterone derivatives

Danazol

Gestrinone (Dimetriose)

We are grateful to **www.endometriosis.org** for their help with this information.

A mention of endometriosis.org for their help with the information of hormonal treatments on Endometriosis UK Website.

But when you click on meet the team and read about their founder...

Lone Hummelshoj



Publisher/Editor-in-chief

Lone created Endometriosis.org February 2005 and, with a great turned it into a global forum for n

for the treatment of endometriosis. She is an active member of the ESHRE, ASRM, and AAGL Special

Interest Groups on Endometriosis; executive director of the World Endometriosis Research Foundation (WERF); and acted as chief executive of the World Endometriosis Society (WES) for sixteen years (2006-2021). Lone speaks at medical conferences around the world, is regularly utilised as a chair, facilitator, and creator of congress scientific programmes, and has published extensively on the impact of endometriosis (with an H-index of 31).

The Founder is an active member of ESHRE.





WHY IS THIS A CONFLICT OF INTEREST?

Donations from big pharmaceutical companies to charities raises a lot of questions in terms of conflict of interest. Especially donations from the companies who manufacture those very products that endometriosis patients are told act as "treatments."

Some patients are even refused tests or further investigations due to not wanting to take those said treatments.

Although Endometriosis UK are required to publish donations to the UK Government, this is not transparent to an endometriosis patient and possibly to GP's who follow their information and guidelines.

It proposes the question of do donations influence the outcome of care that Endometriosis patients receive in the UK, and if the donations influence the information and recourses that Endometriosis UK give and tell patients and GP's.

Does Endometriosis UK need to be more open and transparent on their website with where they receive donations from, how much and what that company manufactures?

Does Endometriosis UK need to be more transparent with regards to what that funding is used for, how the companies are involved and their links to the BSGE/ESHRE Guidelines?







Being the main source of information for Endometriosis patients in the UK, It is hard to believe that Endometriosis UK can remain impartial in their recommendations and toolkits given the contributions and donations they receive. Especially donations from Pharmaceutical companies that produce the treatment options recommended in the outdated information documents provided by Endometriosis UK and in the ESHRE guidelines.

The question remains whether Endometriosis UK & the ESHRE/BSGE guidelines stakeholders knowingly makes these recommendations given the contributions of big Pharma. And are certain procedures receiving favourable recommendations based on donations over procedures scientifically proven to "treat" endometriosis.

The Fanny Diaries.



#CHANGETHEGUIDELINES

PART TWO

COMING SOON.





SOURCES

REGISTER - OF - CHARITIES. CHARITY COMMISSION. GOV. UK/CHARITY - SEARCH/-/CHARITY - DETAILS/1035810/ACCOUNTS - AND - ANNUAL - RETURNS

WWW.ENDOMETRIOSIS-UK.ORG

HTTP://NEZHAT.ORG/ENDOMETRIOSIS-TREATMENT/HISTORY-OF-ENDOMETRIOSIS/

WWW.BAYER.CO.UK

WWW.TAKEDA.COM

WWW.FIERCEPHARMA.COM

WWW.GEDEONRICHTER.COM/EN

WWW.BSGE.ORG.UK/NEWS/NEW-ESHRE-ENDOMETRIOSIS-GUIDELINE/

HTTPS://JOURNALS.LWW.COM/CO-OBGYN/ABSTRACT/2004/08000/THE_EFFECTIVENESS_OF_LAPAR OSCOPIC EXCISION OF.5.ASPX

WWW.MACROTRENDS.NET

WWW.ACADEMIC.OUP.COM/HROPEN/ARTICLE/2022/2/HOAC009/6537540?LOGIN=TRUE

WWW.ENDOMETRIOSIS.ORG

HTTPS://WWW.MEDICINENET.COM/SCRIPT/MAIN/ART.ASP? ARTICLEKEY=225450

ELEARNING.RCGP.ORG.UK

HTTPS://PCWHF.CO.UK/NEWS/GEDEON-RICHTER-RECEIVES-LICENCE-FOR-THE-FIRST-AND-ONLY-RELOADABLE-SINGLE-HANDED-INTRAUTERINE-DELIVERY-SYSTEM-IUS-FOR-CONTRACEPTION-IN-THE-UK/#

