

# Study of association between deep dyspareunia and endometriosis in a cohort of 2851 women operated for a benign gynecologic disorder

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## RESULTS

Table 1: General characteristics of women

	Dyspareunia n = 1543	No dyspareunia n = 1318	p-value
Age (years old)	31.3 ± 5.3	32.5 ± 5.3	< 0.01
BMI (kg/m <sup>2</sup> )	22.3 ± 4.3	23.1 ± 4.3	< 0.01
Tobacco use, n (%)	664 (43.0)	459 (34.8)	< 0.01
<b>Menstrual cycle characteristic</b>			
Regular cycle, n (%)	1176 (76.2)	1048 (79.5)	0.03
Menorrhagia, n (%)	800 (51.9)	539 (40.9)	< 0.01
Length of menstruations, (days)	5.6 ± 2.4	5.1 ± 2.2	< 0.01
Use of oral contraceptive pill, n (%)	1309 (84.8)	974 (73.9)	< 0.01
Use of intra-uterine device, n (%)	123 (8.0)	107 (8.1)	0.89
<b>Pregnancies</b>			
Nulligravidity, n (%)	1145 (74.2)	929 (70.5)	0.03
Nulliparity n (%)	1191 (77.2)	1008 (76.5)	0.66
<b>Antecedent of uterine surgery (%)</b>			
Cesarean section	152 (9.9)	160 (12.1)	0.05
Myomectomy	96 (63.1)	70 (43.7)	0.01
Hysteroscopy	28 (18.4)	48 (30.0)	0.03
	24 (10.8)	36 (12.5)	0.29
<b>Main surgical indication</b>			
Pain	936 (60.7)	346 (26.2)	
Infertility	160 (10.4)	400 (30.4)	
Pain and infertility	313 (20.3)	158 (12.0)	< 0.01
Ovarian cysts	54 (3.5)	187 (14.1)	
Myomas	65 (4.2)	162 (12.3)	
Other	14 (0.8)	55 (4.2)	
<b>Endometriosis diagnostic, n (%)</b>			
In a first degree relative, n (%)	1018 (66.0)	481 (36.5)	< 0.01
	141 (9.1)	62 (4.7)	< 0.01
Previous surgery for endometriosis, n (%)	398 (25.4)	99 (7.5)	< 0.01
Previous surgery for endometrioma, n (%)	169 (10.9)	38 (2.9)	< 0.01

Table 2: Comparison of clinical symptoms

	Dyspareunia n = 1543	No dyspareunia n = 1318	p-value
Infertility, n (%)	484 (31.4)	563 (42.7)	< 0.01
Duration of infertility, months	38.7 ± 30.9	34.3 ± 28.2	< 0.01
<b>Painful symptoms and characteristics</b>			
Pain, n (%)	1249 (81.0)	504 (38.2)	< 0.01
Duration of pelvic pain (months)	51.4 ± 57.3	32.9 ± 45.2	< 0.01
Primary dysmenorrhoea, n (%)	801 (51.9)	442 (33.5)	< 0.01
Secondary dysmenorrhoea, n (%)	552 (35.8)	304 (23.1)	< 0.01
Oral contraceptive administration for severe primary dysmenorrhoea, n (%)	333 (41.6)	119 (27)	< 0.01
School absenteeism, n (%)	497 (32.2)	221 (16.8)	< 0.01
Malaise during menses, n (%)	194 (12.6)	73 (5.5)	< 0.01
<b>Mean VAS scores</b>			
Dysmenorrhoea	6.7 ± 2.7	4.2 ± 3.3	< 0.01
Deep Dyspareunia	6 ± 2.3	0	< 0.01
Non-cyclic pelvic pain	3.4 ± 3.2	1.4 ± 2.6	< 0.01
Gastro-intestinal symptoms	3.2 ± 3.5	1 ± 2.3	< 0.01
Low urinary tract symptoms	1 ± 2.4	0.3 ± 1.3	< 0.01
<b>Severe painful symptoms (VAS ≥ 7), n (%)</b>			
Dysmenorrhoea	982 (63.6)	399 (30.5)	< 0.01
Deep dyspareunia	641 (41.5)	0	< 0.01
Non-cyclic pelvic pain	307 (19.9)	98 (7.5)	< 0.01
Gastro-intestinal symptoms	375 (24.3)	80 (6.1)	< 0.01
Low urinary tract symptoms	111 (7.2)	25 (1.9)	< 0.01

Table 3: Anatomical distribution of endometriosis lesions in 1499 women with endometriosis according to the presence of deep dyspareunia

	Dyspareunia n = 1018	No dyspareunia n = 481	p-value	Moderate dyspareunia n = 557	Severe dyspareunia n = 461	p-value
<b>Endometriosis phenotype</b>						
Superficial	239 (23.4)	180 (37.4)	< 0.01	127 (22.8)	112 (24.3)	< 0.01
Endometrioma	199 (19.6)	138 (28.7)		132 (23.7)	67 (14.5)	
DIE	580 (57)	163 (33.9)		298 (53.5)	282 (61.2)	
<b>Presence of endometrioma, n (%)</b>						
Bilateral	401 (39.4)	199 (41.4)	0.47	245 (44)	156 (33.8)	< 0.01
Unilateral	106 (26.4)	52 (26.1)	0.06	64 (26.1)	42 (26.9)	0.77
<b>Deep infiltrating endometriosis, n (%)</b>						
Mean number of DIE lesions	2.7 ± 0.1	2.3 ± 0.1	< 0.01	2.7 ± 0.1	2.7 ± 0.1	0.95
<b>Number of women with DIE lesions</b>						
n = 1, n (%)	197 (34)	80 (49.1)	< 0.01	100 (33.6)	97 (34.4)	0.83
n ≥ 2, n (%)	383 (66)	83 (50.9)		198 (66.4)	185 (65.6)	
<b>Anatomical localisation of DIE lesions</b>						
• Utero-sacral ligaments (USL)	431 (74.3)	103 (63.2)	< 0.01	225 (40.4)	206 (44.7)	0.20
• Bilateral	155 (26.7)	32 (19.6)	0.01	85 (37.8)	70 (34.0)	0.23
• Unilateral	276 (47.6)	71 (43.6)		140 (62.2)	136 (66.0)	
• Vagina	245 (42.2)	45 (27.6)	< 0.01	128 (43.0)	117 (41.5)	0.72
• Bladder	80 (13.8)	40 (24.5)	< 0.01	48 (16.1)	32 (11.4)	0.09
• Intestine DIE lesions	283 (48.8)	62 (38)	0.02	137 (46.0)	146 (51.8)	0.16
• Mean number of intestinal lesions	2 ± 0.1	2 ± 0.2	0.86	2 ± 0.1	2 ± 0.1	0.88
• Ureter	41 (7)	17 (10.4)	0.37	24 (4.3)	17 (3.7)	0.43
• Bilateral	5 (12.2)	2 (11.8)	0.96	2 (0.7)	3 (1.1)	0.68
• Unilateral	36 (87.8)	15 (88.2)		22 (7.4)	14 (5.0)	
<b>DIE Surgical classification, n (%)</b>						
USL	183 (31.6)	48 (29.5)		95 (31.9)	88 (31.2)	
Vagina	66 (11.4)	16 (9.8)	< 0.01	36 (12.1)	30 (10.6)	0.39
Bladder	39 (6.7)	32 (19.6)		24 (8.1)	15 (5.3)	
Intestine	251 (43.3)	50 (30.7)		119 (39.8)	132 (46.8)	
Ureter	41 (7)	17 (10.4)		24 (8.1)	17 (6.1)	
<b>ASRM stage</b>						
Stage 1	243 (23.9)	145 (30.2)		135 (24.2)	108 (23.4)	
Stage 2	219 (21.5)	92 (19.1)	< 0.01	103 (18.5)	116 (25.2)	0.06
Stage 3	248 (24.4)	135 (28.1)		147 (26.4)	101 (21.9)	
Stage 4	308 (30.3)	109 (22.7)		172 (30.9)	136 (29.5)	
<b>ASRM score</b>	1009 women	477 women				0.83
Mean total ASRM score	30.2 ± 0.9	26.3 ± 1.3	0.02	30.5 ± 1.3	29.8 ± 1.4	0.69
Mean implants ASRM score	13.3 ± 0.4	12.6 ± 0.5	0.3	13.8 ± 0.5	12.6 ± 0.6	0.09
Mean adhesions ASRM score	17.3 ± 0.7	13.4 ± 0.9	< 0.01	17.2 ± 1.0	17.5 ± 1.1	0.83
<b>Pouch of Douglas involvement, n (%)</b>						
Partial	428 (42)	139 (30)				
Total	217 (21.3)	69 (14.4)	< 0.01	118 (21.2)	99 (21.5)	0.96
	211 (20.7)	70 (14.6)		114 (20.5)	97 (21.0)	

Table 4: Determinants of dyspareunia according to endometriosis localisation in 1499 women

	Dyspareunia		Severe dyspareunia (EN ≥ 7)	
	OR	95% CI	OR	95% CI
Endometrioma	1.08	0.81 – 1.45	0.69	0.49 – 0.97
DIE without vaginal and/or rectal localisation	2.07	1.51 – 2.84	1.40	1.02 – 1.93
Vaginal	2.89	1.66 – 5.02	1.52	0.93 – 2.47
Rectal	2.30	1.50 – 3.53	2.03	1.36 – 3.02
Vaginal and rectal	3.91	3.13 – 7.69	2.03	1.43 – 2.89

## CONTEXT

- Deep dyspareunia is a cardinal questioning item for the diagnosis of endometriosis and is associated to lesions of Douglas cul-de-sac.
- Little is known about the association between intensity of dyspareunia and disease severity.

## AIM OF THE STUDY

- To evaluate the association between intensity of deep dyspareunia and anatomical sites of endometriosis.

## MATERIAL AND METHODS

- We undertook a monocentric observational study including using data collected prospectively in non-pregnant patients aged between 18 and 42 years who had undergone surgical exploration for benign gynecological conditions in a single university tertiary referral center between January 2012 and December 2019.
- Among the 2861 included women, women with deep dyspareunia were compared with women with no dyspareunia taken as controls, for baseline characteristics and painful symptoms. Pain intensity was assessed with a 10-cm visual analogue scale (VAS). Painful symptoms were considered as severe when VAS was ≥ 7.
- Then, we compared anatomical distribution of deep infiltrating endometriosis (DIE) according to the presence of dyspareunia

## CONCLUSION AND KEY MESSAGES

- Deep dyspareunia is significantly associated with endometriosis and DIE.
- Severe dyspareunia is associated with rectal +/- vaginal localisation.
- Dyspareunia is not synonymous of exclusive vaginal localisation and is a marker of disease severity (intestine lesions)