WOMEN'S HEALTH

Period pain you should not ignore

There's a cancer risk, writes Alison Batcheler

erth singer-songwriter Natalie Ripepi, has had a lifelong battle with endometriosis — but she never expected it would threaten her life.

Like most women with the condition, the 37-year-old thought endometriosis was benign, as it is in more than 99 per cent of cases. Tragically, however, she learnt that in rare, severe cases such as hers it could become malignant.

While emphasising that it was rare — in fewer than one per cent of cases - gynaecological oncologist Jason Tan said cells in endometriotic tissues growing outside the uterus could transform into a malignant clear cell cancer which could then spread.

"Endometriosis can change to become cancer — it is not common but I have seen three cases in the past 12 months," said Dr Tan, who is a specialist operating at Hollywood Private and King Edward hospitals.

The problem is most people think endometriosis is completely benign so they don't tend to worry about it."

Dr Tan said women with severe or residual endometriosis required appropriate diagnosis, treatment and follow up. Careful monitoring and removal of excessive, benign endometriotic

tissue could prevent such a tragic complication, he said.

"Although there is no clear evidence, there is growing consensus that endometriotic tissue deposits larger than 4cm should be excised," he said.

Having just gone through major surgery on August 31 to remove cancerous tissue from her abdomen, bowel and liver, and with chemotherapy to come, Ms Ripepi wants women to take endometriosis and abdominal symptoms seriously.

"Periods don't have to be painful you don't have to put up with the monthly dramas, it shouldn't be so painful that they interfere with your daily activities, and if it is you should go and seek help.'

"Don't see it out, if you are in that much pain go and get some help and look further," she said.

Even before she was accurately diagnosed with severe endometriosis after a laparoscopy in 2005, she said she thought the heavy, painful periods she had since her early 20s were part of being female and tended not to emphasise those symptoms when she saw doctors.

The result was her symptoms were incorrectly attributed to irritable bowel syndrome. Each month, the pain had her doubled over and was not eased by anti-inflammatory medication.



Heavy bleeding lasted for a week. "I just kept going — I didn't want to seem a wuss, crying over my 'girlies' every month," she

"You are told to expect your

periods would be painful - no one ever told me what a normal bleed was, so if you don't know what is normal you don't know what to ask your doctor about.

Relief came in 2006 when she

had a large amount of endometriotic tissue throughout her abdomen removed by laser. Regular scans and monitoring followed to keep the condition in

So when she recently started to experience some increase in abdominal pain and bloating she again attributed it to endometriosis and tried to "tough it out" until her next check up. Unfortunately, her condition had progressed.

Ms Ripepi, who is well known on the Perth music scene, is hoping to organise and perform in a benefit concert when her health permits. For details, see natripepi.com.

 Management of endometriosis and menstrual disorders is available at the Kind Edward Memorial Hospital Gynaecology and Endoscopy Clinics. their GP.

Teen years disrupted by endometriosis



At the age of 13, Emma Drew was doubled over in pain in a children's hospital being treated for a women's condition.

"Due to my endometriosis, I was hardly ever at school, and in hospital more then I care to remember,"she said.

"After lots of surgeries and heaps of different hormonal treatments, I dropped out of my high school in Year 10. It was all too much to handle. I enrolled with distance education and started doing my schooling from home and hospital beds instead. It was a difficult time and I was, for the most part, a miserable teen."

Looking back now, she believes her teen years would have been far easier if society, and even some members of the medical profession, had been more aware and accepting of such gynaecological conditions in young women.

Ms Drew said she had seen her first gynaecologist the year she started high school, after having periods so painful and lasting so long, that she would faint from pain and fatigue. Luckily, she said, her mother, a nurse who herself had been diagnosed with endometriosis at 17 and had a hysterectomy at 27, had kept a watchful eye out for the condition and ensured early on that she got expert care.

Now aged 26, Ms Drew said her health had improved significantly and it had been two years since she had had to visit a hospital emergency department because of endometriosis pain. She had a good job with an understanding boss who allowed her time off work if needed because of her condition.

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