







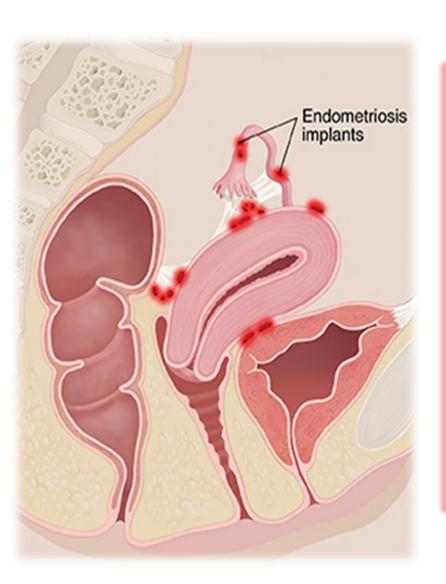
19-21 January 2023 Berlin, Germany



Have we a validated pathogenesis after almost 100 years from the Samson's Theory?

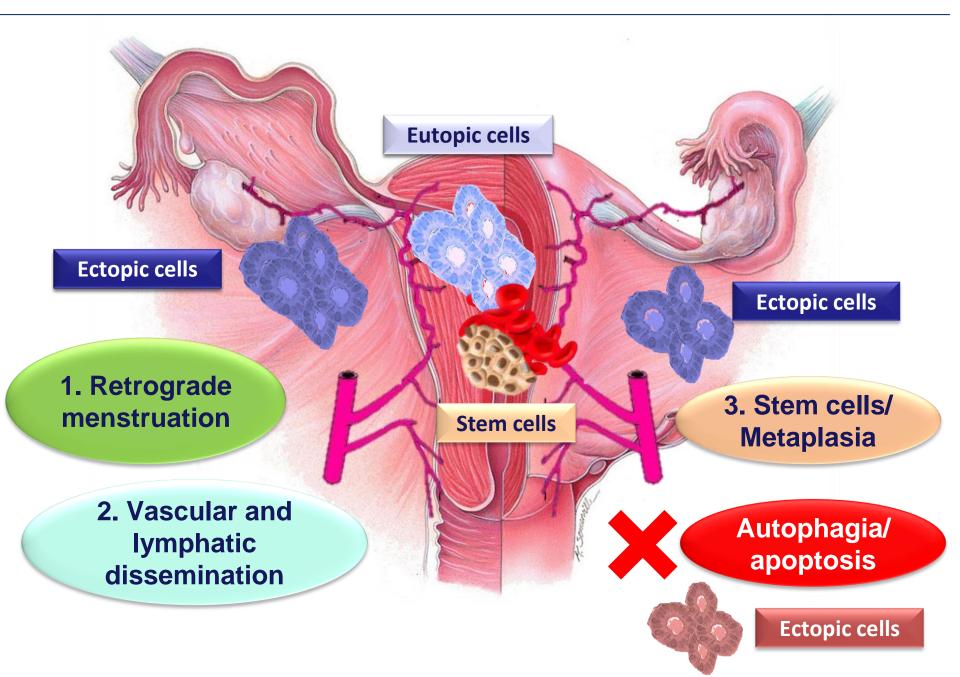
Prof. Felice Petraglia

Endometriosis

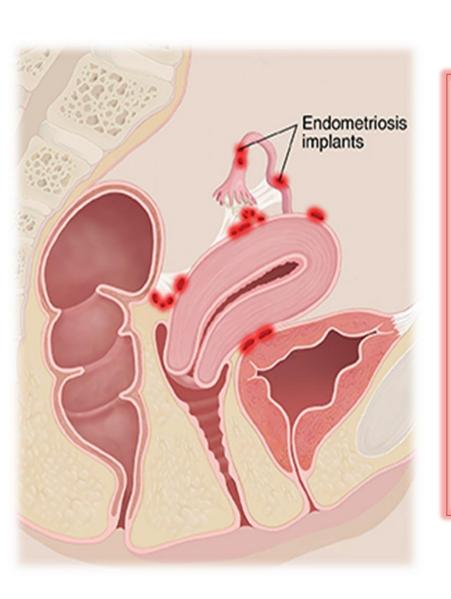


How do eutopic endometrial cells become ectopic?

Endometriosis: the mechanisms

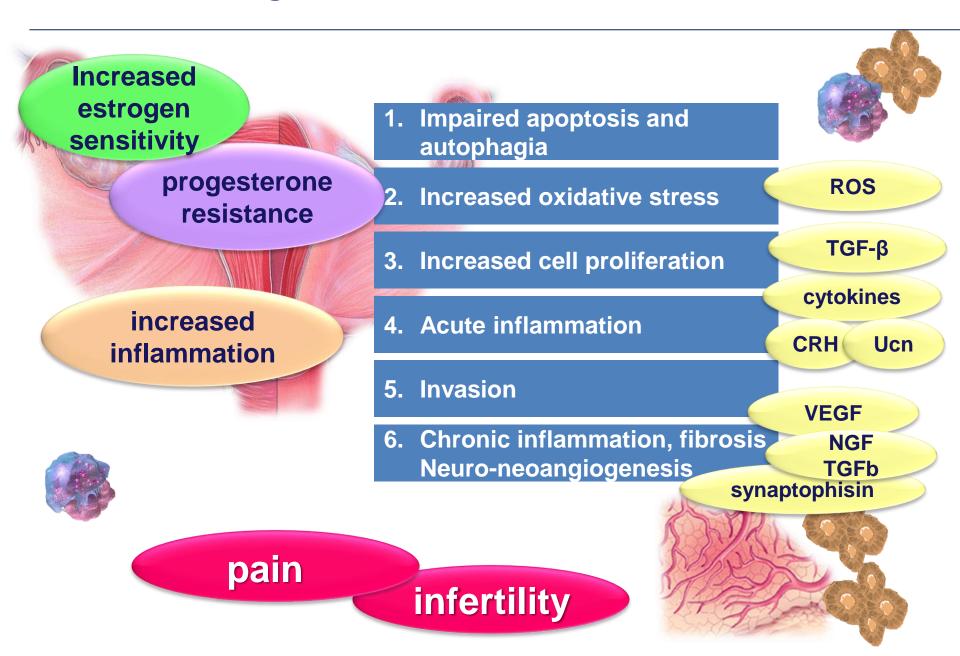


Endometriosis

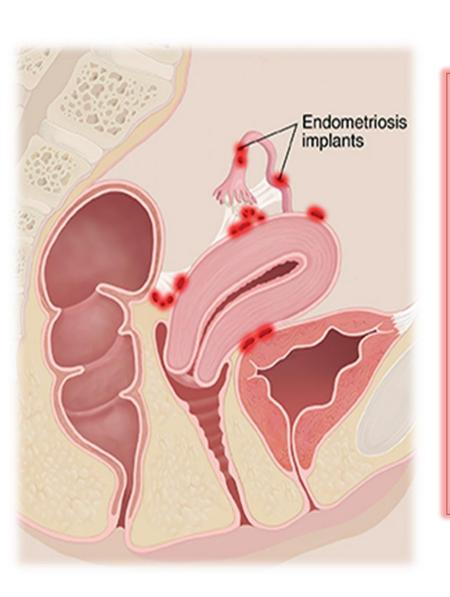


What is the most recognized pathogenesis on 2023?

Pathogenesis of endometriosis on 2023

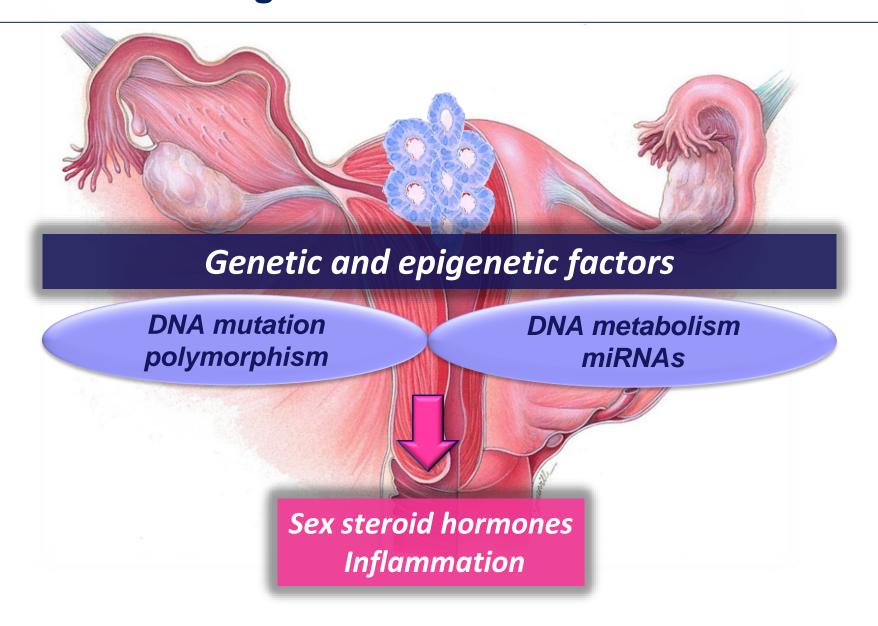


Endometriosis

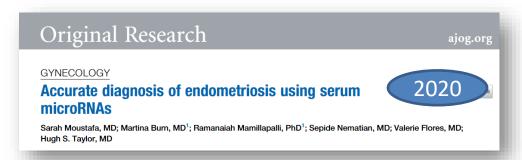


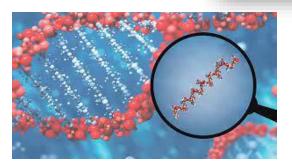
Why is clinically relevant to understand the pathogenesis?

Pathogenesis of endometriosis



Non-invasive diagnosis of endometriosis: miRNAs





- miR-125b-5p
- miR-150-5p
- miR-342-3p
- miR-451a
- miR-3613-5p
- let-7b

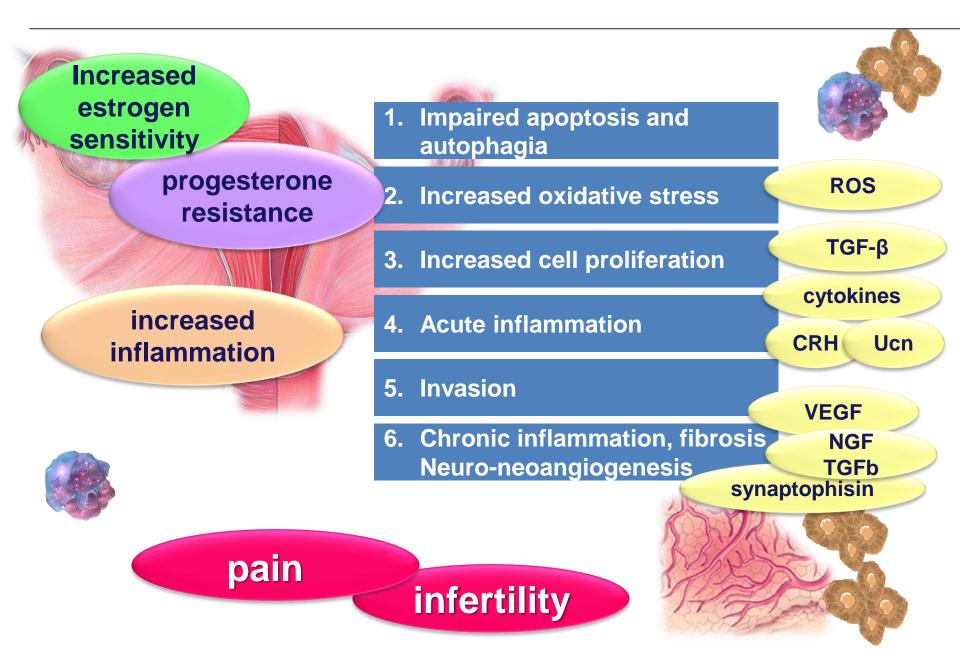
Circulating microRNA biomarkers can reliably differentiate between endometriosis and other gynecological pathologies



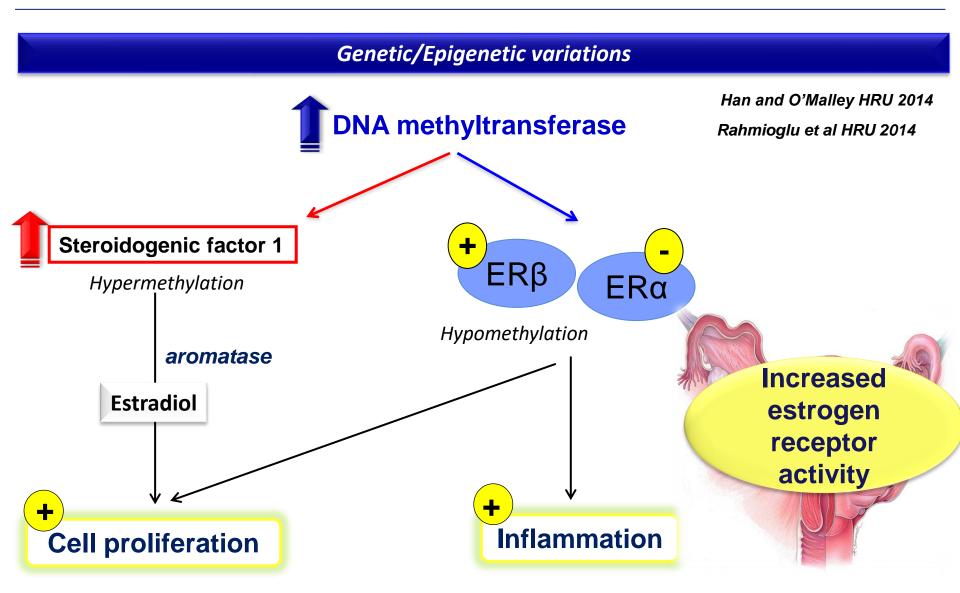


Saliva-based diagnostic miRNA signature for endometriosis

Pathogenesis of endometriosis on 2023



Pathogenesis of endometriosis: Increased estrogen receptors activity



Drugs decreasing ovarian estrogen secretion GnRH analogs

- Goserelin
- Leuprolide
- Nafarelin
- Buserelin
- Triptorelin

Cochrane Database of Systematic Reviews Review - Intervention

Gonadotrophin-releasing hormone analogues for pain associated with endometriosis

Julie Brown, Alice Pan, Roger J Hart Authors' declarations of interest

Version published: 08 December 2010 Version history



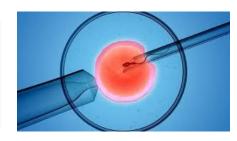
Randomised controlled trials showed that treatment for 3 months with a GnRH agonist may be as effective as 6 months in terms of pain relief



The endometriotic lesions returned to the original volume within 6 months of follow-up after cessation of treatment and pain comes back



The administration of GnRH-a for a period of 3 to 6 months <u>prior to ART</u> may increase the odds of clinical pregnancy by 4-fold



Endometriosis and oral GnRH antagonists: Elagolix

The NEW ENGLAND JOURNAL of MEDI/

2017

ORIGINAL ARTICLE

Treatment of Endometriosis-Associated Pain with Elagolix, an Oral GnRH Antagonist

H.S. Taylor, L.C. Giudice, B.A. Lessey, M.S. Abrao, J. Kotarski, D.F. Archer, M.P. Diamond, E. Surrey, N.P. Johnson, N.B. Watts, J.C. Gallagher, J.A. Simon, B.R. Carr, W.P. Dmowski, N. Leyland, J.P. Rowan, W.R. Duan, J. Ng, B. Schwefel, J.W. Thomas, R.I. Jain, and K. Chwalisz

ELAGOLIX: a new oral, nonpeptide
GnRH antagonist

150 mg once/day

200 mg twice/day

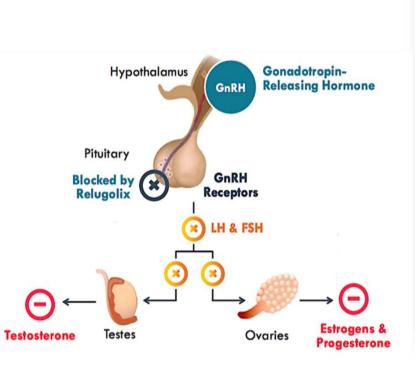
6-month phase 3 trials
Elaris Endometriosis I and II [EM-I and EM-II])

Women with surgically diagnosed endometriosis and moderate or severe endometriosis-associated pain.



August 2018

Endometriosis and oral GnRH antagonists: Relugolix



ORIGINAL ARTICLE: ENDOMETRIOSIS

Relugolix, an oral gonadotropin-releasing hormone receptor antagonist, reduces endometriosis-associated pain in a dose-response manner: a randomized, double-blind, placebo-controlled study

Yutaka Osuga, M.D., Ph.D., ^a Yoshifumi Seki, M.Sc., ^b Masataka Tanimoto, B.Pharm., ^b Takeru Kusumoto, M.Sc., ^b Kentarou Kudou, M.Sc., ^b and Naoki Terakawa, M.D., Ph.D. ^c

Fert Ster, 2020

Phase 2, multicenter, randomized, double-blind, placebo-controlled study

Endometriosis and oral GnRH antagonists: Linzagolix

EDELWEISS study

ORIGINAL ARTICLE: ENDOMETRIOSIS

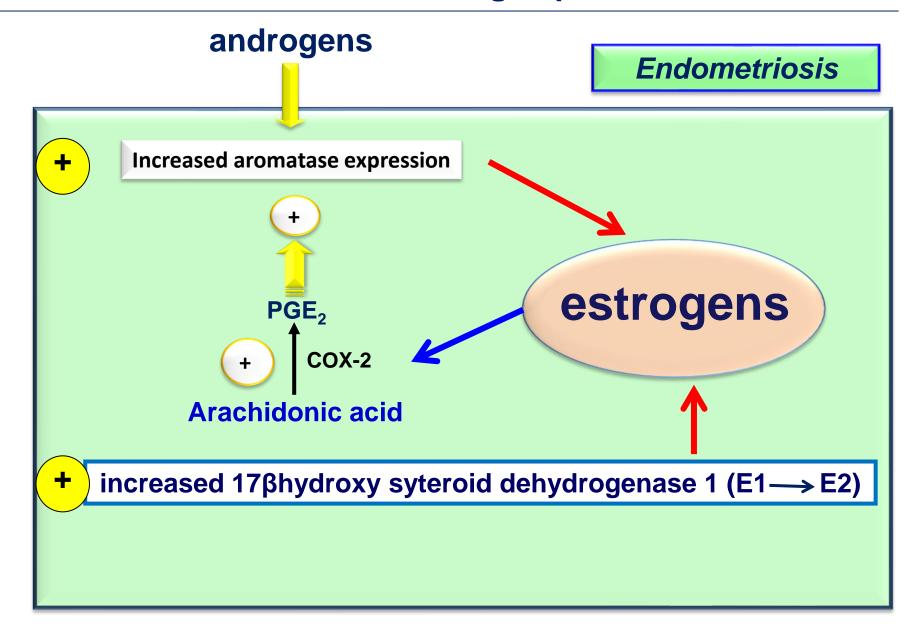
Treatment of endometriosisassociated pain with linzagolix, an oral gonadotropin-releasing hormone-antagonist: a randomized clinical trial

Fert Ster, 2020

Jacques Donnez, M.D., Ph.D., ^a Hugh S. Taylor, M.D., Ph.D., ^b Robert N. Taylor, M.D., Ph.D., ^c Mark D. Akin, M.D., ^d Tatyana F. Tatarchuk, M.D., Dr. Sc., ^e Krzysztof Wilk, M.D., ^f Jean-Pierre Gotteland, Ph.D., ^g Veronique Lecomte, Pharm.D., ^g and Elke Bestel, M.D.

Phase 2b, double-blind, placebo-controlled, dose-ranging study

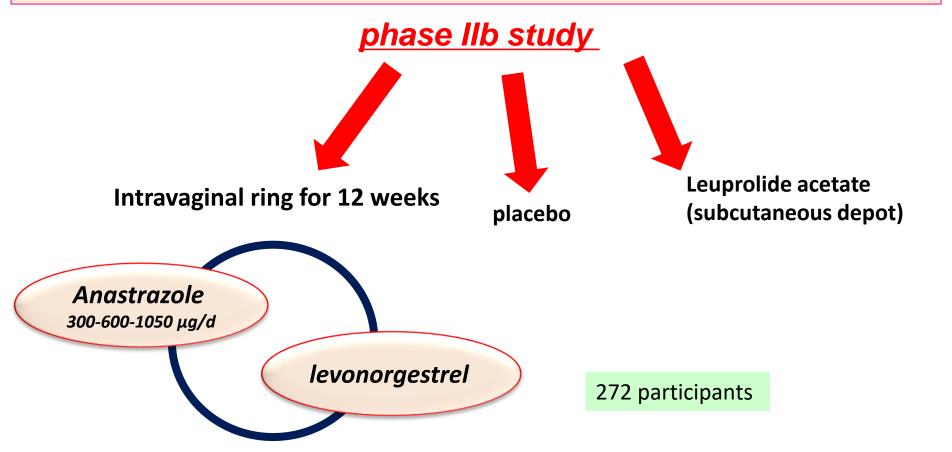
Pathogenesis of endometriosis: increased local estrogen production



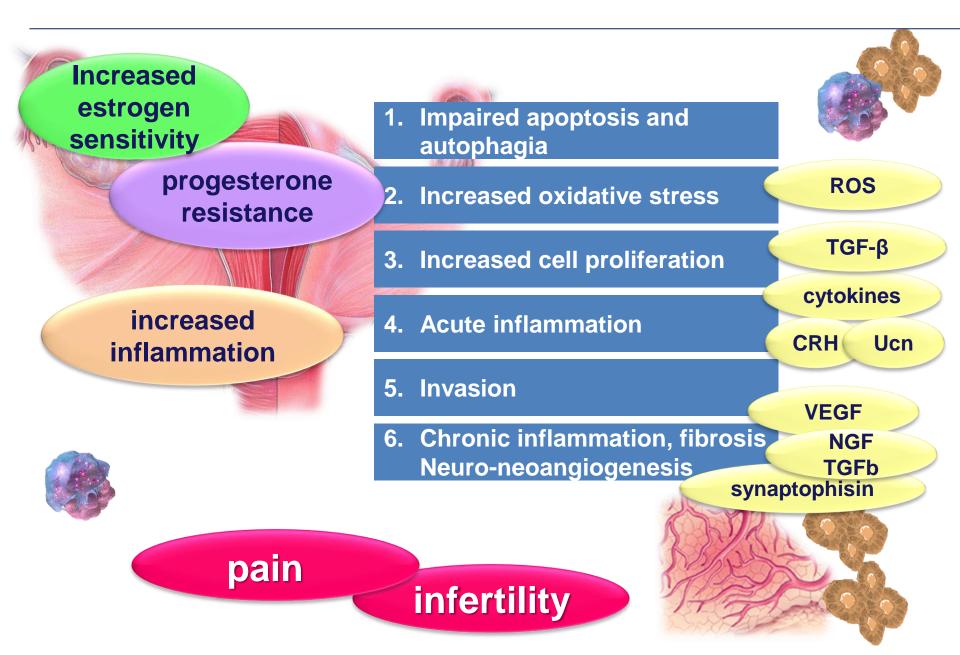
Drugs decreasing peripheral estrogen secretion Aromatase inhibitors

A Randomized, Double-blind, Double-dummy, Parallel- Group, Multi-center Phase IIb Study

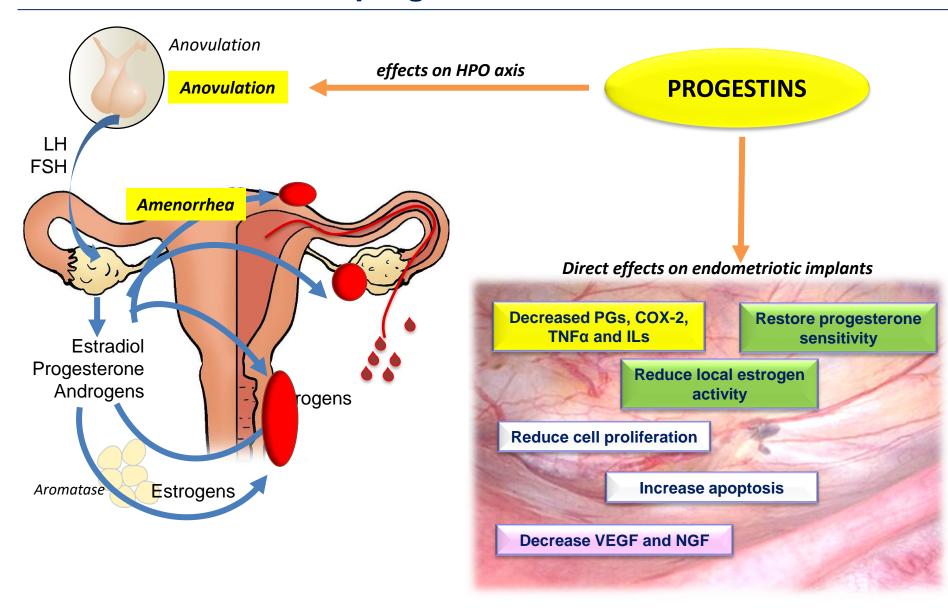
to Assess the Efficacy and Safety of Different Dose Combinations of an Aromatase Inhibitor and levonorgestrel in an Intravaginal Ring Versus Placebo and Leuprorelin / Leuprolide Acetate in Women With Symptomatic Endometriosis.



Pathogenesis of endometriosis on 2023

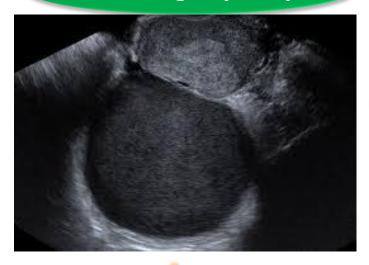


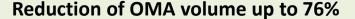
Endometriosis and progestins: mechanisms of action



Dienogest and ovarian endometriosis

DNG 2 mg/day orally





Effective in reduction of pain symptoms (dysmenorrhea and pelvic pain)



Del Forno et al, EJOG, 2019 Vignali et al, Gynecol Endocrinol, 2020 Angioni et al, Gynecol Endocrinol, 2020



After 24 months of treatment with DNG, complete resolution of recurrent OMA in **57.1%**

Koshiba et al, J Obstet Gynaecol Res. 2018

DNG EARLY after recurrence of postsurgical OMA reduces the risk of repeated surgery.

Lee et al, Reprod Sci. 2018

AFTER SURGERY FOR OMA

Endometrioma recurrence after 5 ys follow up: Placebo 69%

Dienogest for 60 months: 4%

Ota et al, JEPPD, 2015

No recurrence after 24 months of DNG, with better compliance than GnRH agonists + COC

Seo et al, EJOG, 2019

Dienogest for DIE: long term treatment

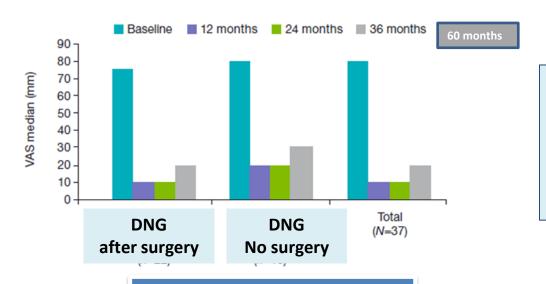


Dyspareunia
Dysmenorrhea
pelvic pain
bowel pain



Dienogest is an effective medication to control symptoms of pain related to DIE, even without reducing the volume of DIE nodules.

Leonardo-Pinto et al, EJOG, 2017



Long-term (60-month) treatment with DNG in women with endometriosis effectively <u>reduced</u> <u>pelvic pain and avoided pain</u> recurrence post-surgery.

Up to 60 months

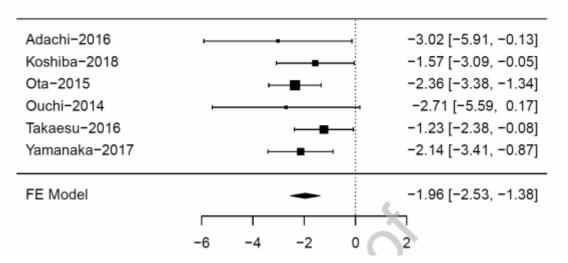
Dienogest for recurrence of endometriosis

Meta-Analysis > J Minim Invasive Gynecol. Nov-Dec 2020;27(7):1503-1510. doi: 10.1016/j.jmig.2020.05.007. Epub 2020 May 16.

Dienogest and the Risk of Endometriosis Recurrence Following Surgery: A Systematic Review and Metaanalysis

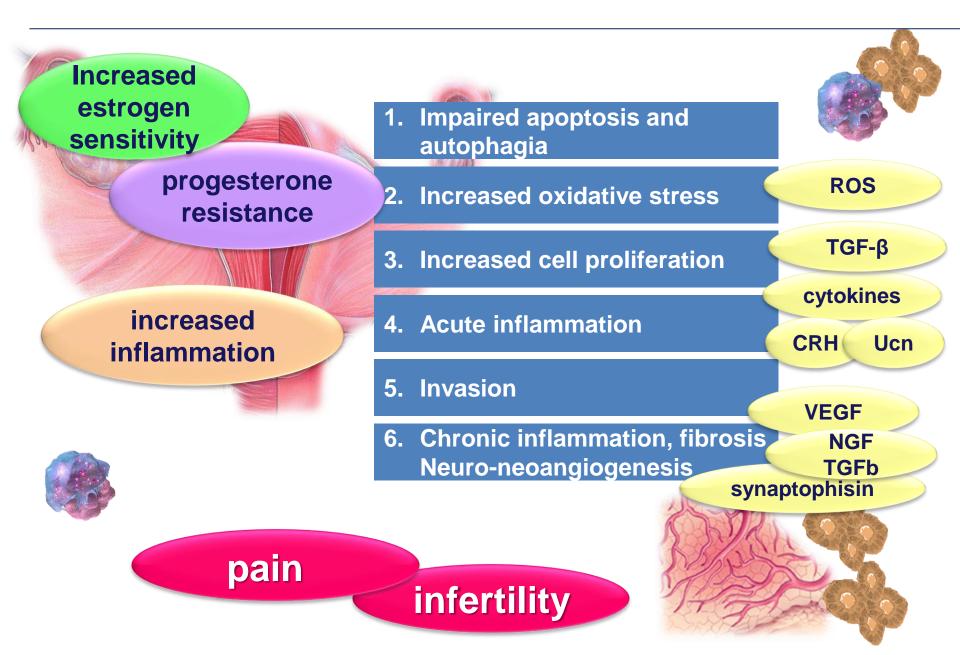
Andrew Zakhari ¹, Darl Edwards ¹, Michelle Ryu ², John J Matelski ³, Olga Bougie ⁴, Ally Murji ⁵

Figure 4. Log Odds of Endometriosis Recurrence for Dienogest Compared to Controls



Patients receiving dienogest after conservative surgery for endometriosis had significantly lower risk of postoperative disease recurrence than those who were expectantly managed.

Pathogenesis of endometriosis on 2023



Endometriosis: drugs inhibiting autophagy

Original Article

The inhibition of reactive oxygen species (ROS) by antioxidants inhibits the release of an autophagy marker in ectopic endometrial cells

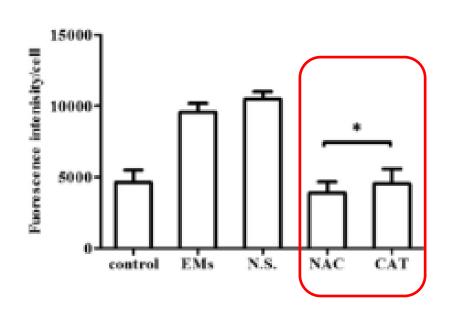


Huixia Lu a, Hong Hu a, Yi Yang b, Shaobo Li c, *

Taiwan J Obstet Gynecol, 2020

The antioxidants N-acetyl-L-cysteine or catalase significantly reduced levels of the autophagy marker LC3 and caused levels of Beclin-1 to significantly decrease.

Antioxidant therapy shows potential to treat endometriosis by acting on autophagy



Endometriosis: drugs increasing apoptosis



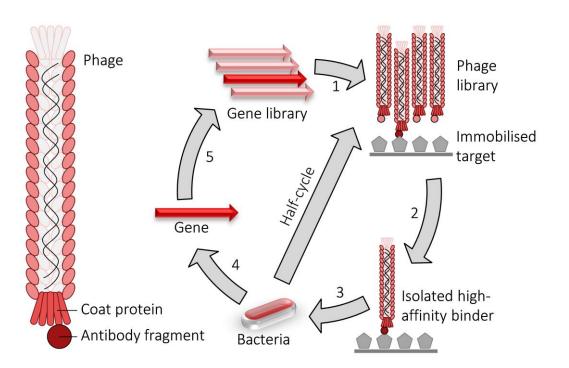
Received 21 Nov 2013 | Accepted 22 Jun 2014 | Published 22 Jul 2014

DOI: 10.1038/ncomms5478

OPEN

Development of pro-apoptotic peptides as potential therapy for peritoneal endometriosis

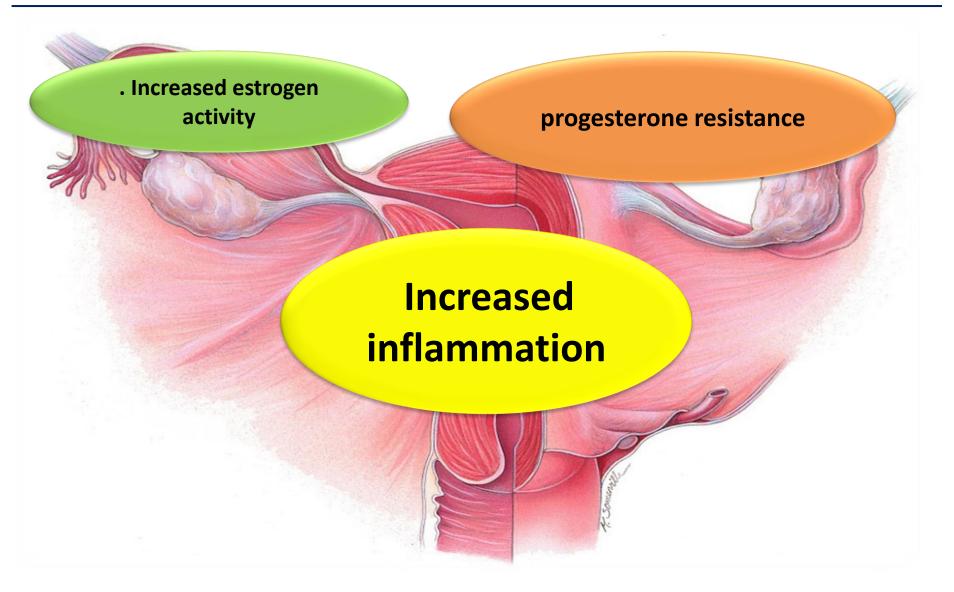
K. Sugihara¹, Y. Kobayashi², A. Suzuki³, N. Tamura², K. Motamedchaboki², C.-T. Huang², T.O. Akama², J. Pecotte⁴, P. Frost⁴, C. Bauer⁴, J.B. Jimenez Jr.⁴, J. Nakayama⁵, D. Aoki³ & M.N. Fukuda²



an endometriosis-targeting peptide that is internalized by cells (z13), using phage display, linked with an apoptosis-inducing peptide

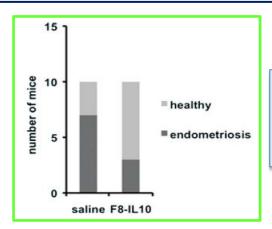
Endometrial cells in endometriosis lesions selectively underwent apoptosis with no effect on neighbouring organs

Endometriosis: pathogenesis on 2023



Endometriosis: inflammation and monoclonal antibodies

Anti-IL-10



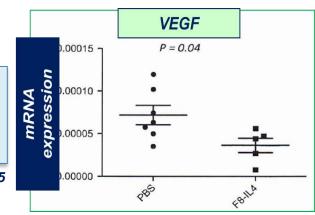
Antibody carriers for pharmacodelivery of anti-inflammatory IL10 in endometriotic lesions

Neri D et al, Hum Reprod 2011

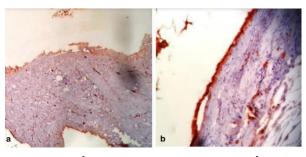
Anti-IL-4

Antibody anti-IL-4 induces an impairment in adhesion, invasion, and vascularization of endometriotic lesions

Quattrone F. et al, Repro Sci 2015



Anti-IL-6



Treated Non treated

Tocilizumab significantly suppressed the volume of endometriotic lesions

El-Zayadi et al, Immunologic Research, 2020



Endometriosis: pain and cannabinoids

Improvment of pain from gynecologic conditions

National guidelines cannot recommend cannabis-based products because the lack of evidences

Randomized clinical trials on the use of cannabinoids for the treatment of endometriosis are currently ongoing. > Obstet Gynecol. 2022 Feb 1;139(2):287-296. doi: 10.1097/AOG.000000000004656.

Medical Cannabis for Gynecologic Pain Conditions: A Systematic Review

Angela L Liang 1, Erin L Gingher, Jenell S Coleman

Affiliations + expand

PMID: 35104069 DOI: 10.1097/AOG.000000000004656

Association of endocannabinoids with pain in endometriosis

Thomas Andrieu ¹, Andrea Chicca ², Daniele Pellegata ², Nick A Bersinger ¹, Sara Imboden ^{1 3}, Konstantinos Nirgianakis ^{1 3}, Juerg Gertsch ², Michael D Mueller ^{1 3}

Affiliations + expand

Review > J Minim Invasive Gynecol. 2022 Feb;29(2):169-176. doi: 10.1016/j.jmig.2021.11.017. Epub 2021 Nov 25.

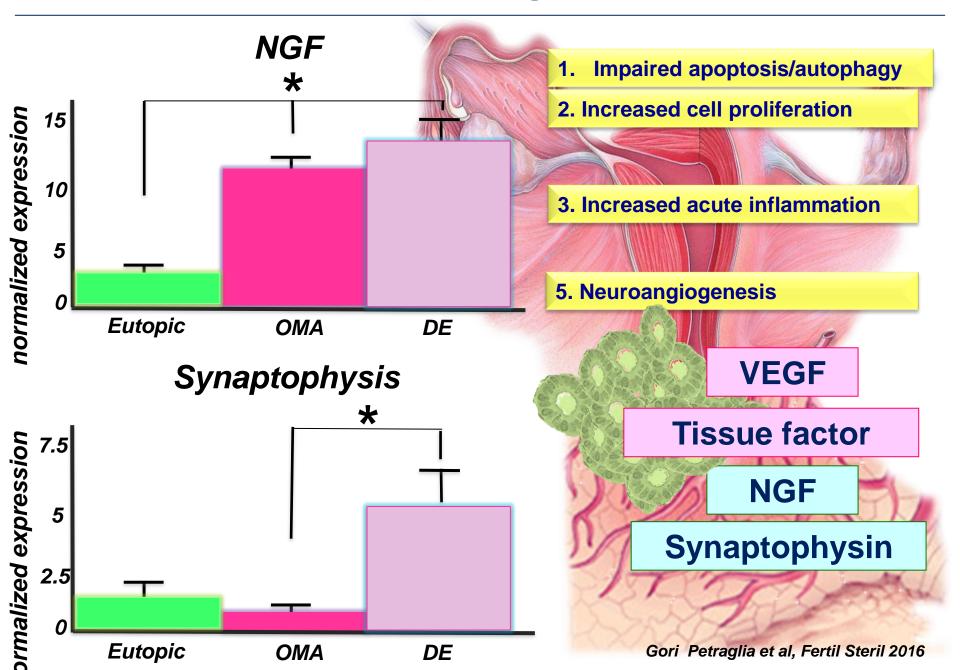
Cannabidiol for the Management of Endometriosis and Chronic Pelvic Pain

Megha Mistry ¹, Paul Simpson ², Edward Morris ¹, Ann-Katrin Fritz ³, Babu Karavadra ¹, Carole Lennox ⁴, Ed Prosser-Snelling ¹

Affiliations + expand

PMID: 34839061 DOI: 10.1016/j.jmig.2021.11.017

Endometriosis: pathogenesis on 2023

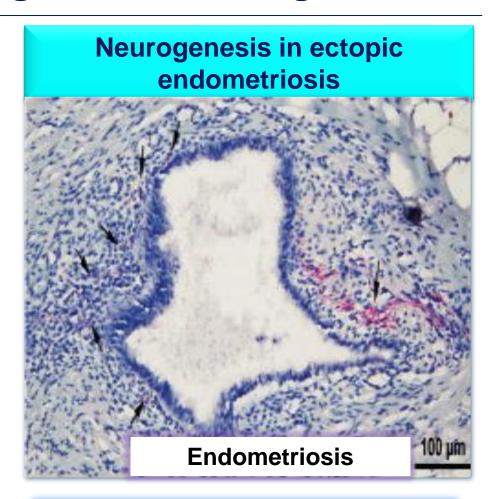


Endometriosis: pathogenesis and diagnosis

Neurogenesis in eutopic endometrium

Increased nerve fiber density, sensory C fibers and adrenergic nerve fibers in the endometrium

Eutopic endometrium



Increased nerve fibres stained with PGP9.5 in the peritoneal endometriotic lesions

Endometriosis: neuroangiogenesis and future drugs

Phase 2

Quinagolide is a selective D2 receptor agonist

It antagonizes VEGF receptor-2 reducing neoangiogenesis (in vitro)

Randomised, double-blind, placebo-controlled, proof-of-mechanism <u>phase 2 trial</u> investigating the effect of quinagolide extended-release **vaginal ring** on reduction of lesions assessed by high-resolution magnetic resonance imaging in women with **endometrioma**, **deep infiltrating endometriosis**, **and/or adenomyosis**.



The LANN Technique to Reduce Postoperative Functional Morbidity in Laparoscopic Radical Pelvic Surgery

Marc Possover, PhD, Jens Quakernack, MD, Vito Chiantera, MD

Nerve sparing surgery

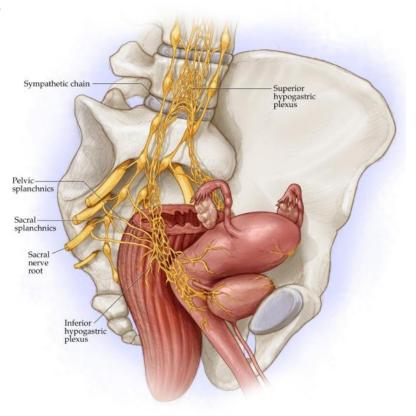
Review > Semin Reprod Med. 2017 Jan;35(1):72-80. doi: 10.1055/s-0036-1597305. Epub 2016 Dec 12.

Nerve Sparing and Surgery for Deep Infiltrating Endometriosis: Pessimism of the Intellect or Optimism of the Will

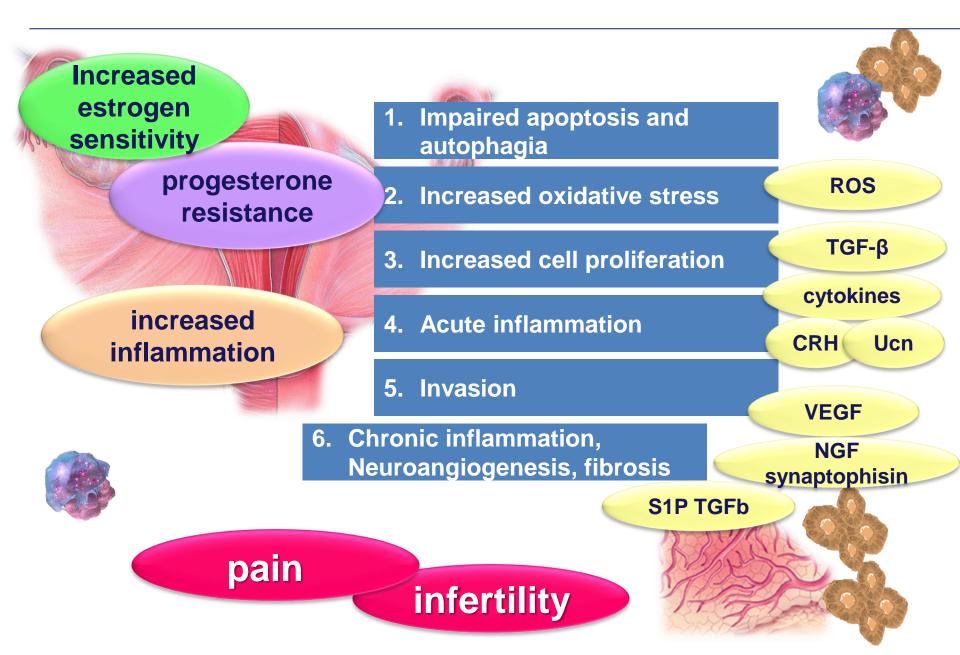
Basma Darwish 1, Horace Roman 1

surgical treatment of deep infiltrating endometriosis with the aim to prevent urinary, rectal, and sexual dysfunction

good outcomes in terms of bladder morbidity; digestive and sexual functions more complex to restore

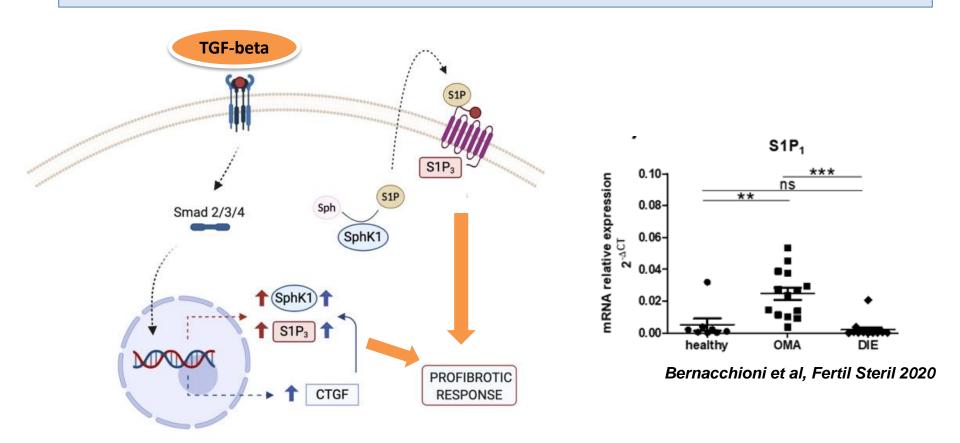


Pathogenesis of endometriosis on 2023



Endometriosis: pathogenesis and fibrosis

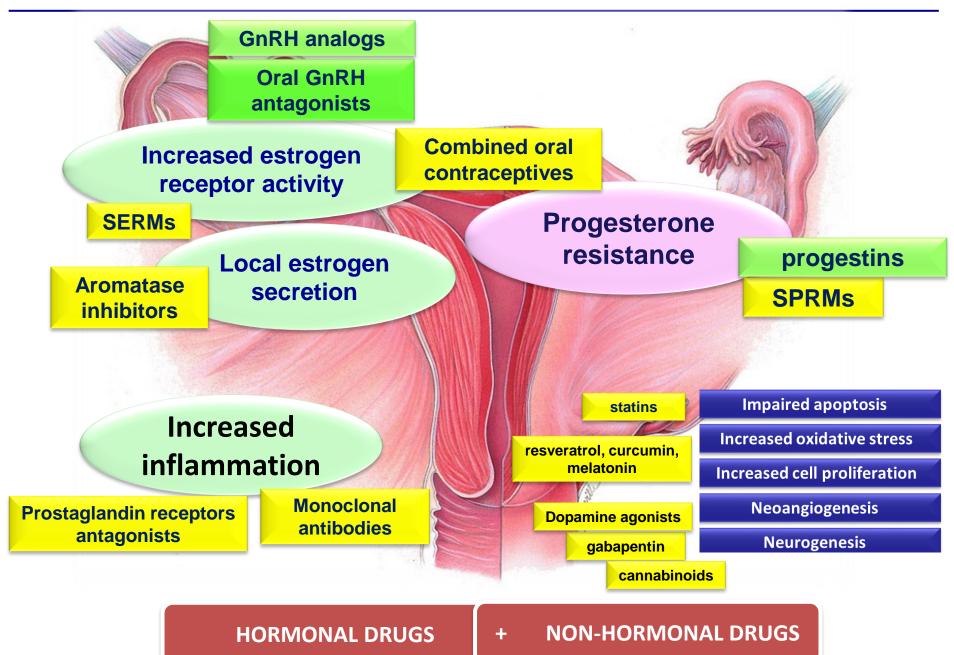
Sphingosine-1-phospate is dysregulated in endometriosis



S1P signaling is implicated in TGFβ1-induced fibrosis

Fingolimod is an oral treatment of multiple sclerosis, modulating S1P.

Endometriosis: pathogenesis and medical treatments



Endometriosis: clinical implications of pathogenesis

Increased estrogen sensitivity

progesterone resistance

increased inflammation

Impaired apoptosis and autophagia

Increased oxidative stress

Increased cell proliferation

Neuro-neoangiogenesis

Fibrosis

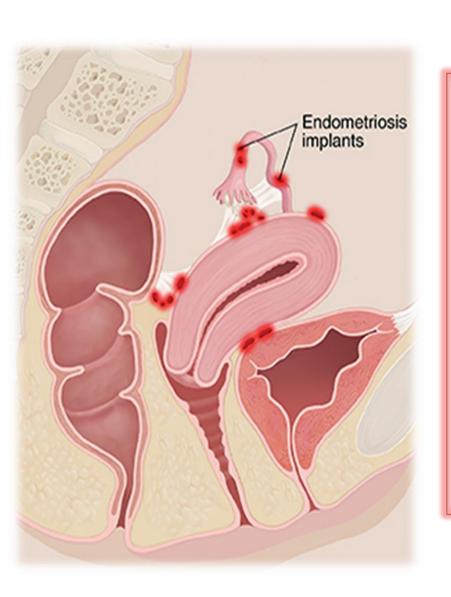
Pathogenetic mechanisms

New diagnostic markers

New drugs

Personalized treatment

Endometriosis 2023



It is clinically relevant to understand the pathogenesis for the diagnostic and therapeutic implications!!



9TH CONGRESS
OF THE SOCIETY OF ENDOMETRIOSIS
AND UTERINE DISORDERS



ENDOMETRIOSIS AND UTERINE DISORDERS:
STRATEGIC MANAGEMENT AND CHALLENGES
IN THE NEW MILLENNIUM

MARCH 15-18 ABU DHABI, UAE



Congress President: Pr. Ghassan Lotfi, UAE SEUD President:

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