Francisca J. G. Martins, Adryelle S. Lima, Riani J. N. Nóbrega, Rayanne De S. Barbosa, Clélia P. da S. Limeira, Juliana A. P. Sa Barreto, Kayan L. Barbosa, Charlineide J. Silva Assistência de enfermagem à mulheres com endometriose: revisão integrativa

# Nursing care for women with endometriosis: integrative review

Assistência de enfermagem à mulheres com endometriose: revisão integrativa Cuidados de enfermería para mujeres con endometriosis: revisión integrativa

### **RESUMO**

OBJETIVO: Analisar as produções científicas acerca da assistência de enfermagem à mulheres portadoras de endometriose. MÉTODO: Trata-se de um estudo descritivo, do tipo revisão integrativa da literatura, com abordagem qualitativa. A identificação ocorreu entre os meses fevereiro e março de 2024, através da busca no portal Biblioteca Virtual em Saúde, do repositório Literatura Latino Americana e do Caribe em Ciências da Saúde, Medical Literature Analysis and Retrieval System Online e Base de Dados de Enfermagem. RESULTADO: Os estudos selecionados abordam a endometriose como uma patologia benigna que afeta o público feminino, mostrando a fragilidade de pesquisas, recursos financeiros e sociais. Dessa forma, enfatiza-se a atuação do profissional de enfermagem frente ao cuidado, garantindo assistência a esse público. CONCLUSÃO: A endometriose é uma patologia que vem acometendo cada vez mais o público feminino. Assim, destaca-se a importância do profissional de enfermagem como mediador da assistência qualificada e humanizada ofertada à portadora.

**DESCRITORES:** Mulheres; Cuidados de Enfermagem; Endometriose.

### **ABSTRACT**

OBJECTIVE: To analyze scientific productions on nursing care for women with endometriosis. METHOD: This is a descriptive study, an integrative literature review, with a qualitative approach. The identification occurred between February and March 2024, through a search in the Virtual Health Library portal, the Latin American and Caribbean Literature in Health Sciences repository, the Medical Literature Analysis and Retrieval System Online, and the Nursing Database. RESULT: The selected studies addressed endometriosis as a benign pathology that affects the female population, showing a weakness in research, financial, and social resources. Thus, we emphasize the role of the nursing professional in providing care, ensuring assistance to this population. CONCLUSION: Endometriosis is a pathology that has increasingly affected the female population. Thus, the importance of the nursing professional as a mediator of the care provided and humanized offered to the patient is highlighted.

**DESCRIPTORS:** Women; Nursing Care; Endometriosis.

### RESUMEN

OBJETIVO: Analizar las producciones científicas sobre los cuidados de enfermería a la mujer con endometriosis. MÉTODO: Se trata de un estudio descriptivo, de revisión integradora de la literatura, con enfoque cualitativo. La identificación se realizó entre los meses de febrero y marzo de 2024, mediante una búsqueda en el portal de la Biblioteca Virtual en Salud, el repositorio de Literatura Latinoamericana y del Caribe en Ciencias de la Salud, el Sistema de Análisis y Recuperación de Literatura Médica en Línea y la Base de Datos de Enfermería. RESULTADO: Los estudios seleccionados abordaron la endometriosis como una patología benigna que afecta a las mujeres, mostrando debilidad en investigación, recursos financieros y sociales. De esta manera, enfatizamos el papel de los profesionales de enfermería en la prestación de cuidados, garantizando la asistencia a esta población. CONCLUSIÓN: La endometriosis es una patología que afecta cada vez más a las mujeres. Así, se destaca la importancia del profesional de enfermería como mediador de la asistencia humanizada que se ofrece al paciente.

DESCRIPTORES: Mujeres; Atención de Enfermería; Endometriosis.

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# INTRODUCTION

ver the decades, public policies aimed at women's health have been standing out in health care networks with the purpose of improving the quality of life of these women. (1)

There are many conditions that affect women's sexual and reproductive health, including endometriosis, which is an inflammatory disease that affects the female reproductive system. It is multifactorial in nature and is characterized by the growth of the endometrium outside the uterine cavity. Statistics indicate that it occurs in 6 to 10% of women of reproductive age, a percentage that represents approximately 176 million women worldwide. (2)

At a national level, research shows that around seven million women are affected by the pathology. The presentation of data on epidemiology becomes uncertain due to the difficulty of diagnosis, treatment, as well as the normalization of the signs and symptoms presented by the patient, in addition to the low number of professionals with in-depth knowledge in the area. (3).

Thus, it is understood that endometriosis is one of the most common benign gynecological diseases, and is currently considered a public health problem, as it impacts several factors, such as: mental and physical health, socioeconomic status and the diagnosis and treatment process. Therefore, it is necessary to have a structure in the Unified Health System (SUS) that is able to welcome these women, identify their problems and make the necessary referrals. (4)

From this perspective, the diagnosis of the disease comes late. However, low suspicion is not justified, as there are several signs and symptoms presented by a patient with the pathology, such as: dysmenorrhea, dyspareunia and pelvic pain.

In this context, nurses who work in primary care, carrying out nursing consultations on sexual and reproductive planning, play a crucial role in providing qualified assistance and comprehensive care to women with endometriosis. (4)

Therefore, this article presents partial results of a survey carried out with 399 elderly people in the city of Maringá about financial violence.

It is therefore clear that, over the years, policies have improved, given that in Brazil there is a national policy aimed at comprehensive women's health, popularly known as PNAISM, which aims to offer comprehensive, specialized, humanized and universal care to all the needs of this public, reducing morbidity and mortality rates, due to causes that can be prevented or avoided. (1)

From there, the following research question emerged: What is the scientific evidence regarding Nursing care for women with Endometriosis?

Thus, the development of this research became relevant because it directly

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affects several contexts. In the social context, considering that many women are diagnosed with Endometriosis late every year, and therefore lack specialized and humanized assistance from the multidisciplinary team.

In the context of nursing care, considering that the professional must be qualified to provide care in accordance with the patient's needs, in terms of the scientific context, there is a lack of studies focused on this subject in overcoming the frontier of knowledge produced until then. It was understood that the research had as its main objective to analyze the scientific productions about nursing care for women with endometriosis.

### **METHOD**

The research is a descriptive study, of the Integrative Literature Review (ILR) type with a qualitative approach, which interprets the scientific production about nursing care for people with endometriosis.

As it is a descriptive study, its main objective was to analyze characteristics found in a given community, population or area, being able to observe the existence of a given phenomenon, as well as the relationships of the variables existing between them. The characteristics studied aimed to collect data and their distribution, such as sex, age, origin, income, education, mental and physical health status.

An Integrative Literature Review (ILR) consists of a collection of research studies conducted by the scientific community that already contribute prior knowledge on the subject under study, allowing for in-depth investigation and serving as a reference for other research. In addition, it enables the resolution of existing problems or can point to new questions to be explored. (7)

The intention of ILR is to understand a specific event and also to comprehensively examine the literature, adding to the discussion on research methods and results and reflections related to future studies. (8)

The choice of the qualitative approach is justified by the understanding that this type of research provides a space for dialogue between the researcher and the interviewed public, thus allowing them to share their experiences with the theme. The objective of this method is to understand reality and the diverse manifestations of social groups. It offers an opportunity to understand and explain the dynamics of everyday life, experiences, structures and relationships with institutions as a result of objective human behavior. (9)

To prepare an integrative literature review (ILR), six steps are essential(8), which are described in the table below.

| Table1 – Stages of the integrative literature review |   |   |  |  |
|--|---|---|--|--|
| STAGES   | DEFINITION                              | ACTIONS   |  |  |
| 1st  | Definition of the theme/proble-<br>ma   | - Development of the hypothesis or research<br>question<br>- Identification of keywords     |  |  |
| 2nd  | Search and selection of primary studies | - Use of databases<br>- Establish inclusion and exclusion criteria for pri-<br>mary studies |  |  |
| 3rd  | Data extraction from primary studies    | - Development of the database<br>- Removal or organization of information                   |  |  |
| 4th  | Critical evaluation of primary studies  | - Critically evaluate the designated studies  |  |  |
| 5th  | Synthesis of the results of the review  | - Discuss the results<br>- Evaluate recommendations   |  |  |
| 6th  | Presentation of the ILR                 | - Develop articles that have the<br>specificity of the review                               |  |  |

Source: Mendes, Silveira and Galvão, 2019.

### 3.1 PREPARATION OF THE GUIDING QUESTION

The elaboration of the review question followed the PVO strategy (Table 2), in which P (participants) refers to the characteristics of the study population, V (variables) used as a filter or identified as categories in the construction of the research strategy, and O (outcomes) represents the indicator of the modification or variation of the participants' conditions in relation to the defined variables. (10)

Following the PVO strategy, the following guiding question arose: What is the scientific evidence regarding nursing care for women with endometriosis?

| TABLE 2 - PVO strategy for constructing the guiding question |   |               |  |  |
|--|---|---------------|--|--|
| STRATEGY ITEMS   | COMPONENTS  | DESCRIPTORS   |  |  |
| Population   | Women with Endometriosis                                | Womens        |  |  |
| Variable   | Nursing Care for Women with<br>Endometriosis            | Endometriosis |  |  |
| Outcomes   | Evaluate Nursing Care for Wo-<br>men with Endometriosis | Nursing Care  |  |  |

Source: (Silva; Otta, 2014).

The search for bibliographic studies in the literature in the database took place in the semester 2024.1, during the period of February and March, after the presentation and qualification of the present research project based on the evaluation of the examining board of the Nursing course at Centro Universitário Vale do Salgado (UNIVS).

Based on the research question, the search for studies was carried out in the following databases: Virtual Health Library (VHL), Latin American and Caribbean Literature in Health Sciences (LILACS), Medical Literature Analysis and Retrieval System Online (MEDLI-NE), and Nursing Database (BDENF). The following Health Science Descriptors (DeCS)/MeSh were used: Nursing; Endometriosis; and Care. The Boolean operator "AND" was applied among the descriptors for the search for articles.

The following inclusion criteria were

established: full text, available in Portuguese and English, addressing the research theme in a time frame from 2006 to 2024.

The choice of time frame is justified by the fact that 2006 was the year in which the Brazilian Ministry of Health established the clinical protocol and therapeutic guidelines for the treatment of Endometriosis, which reorganizes care for people with Endometriosis in a humanized and resolute way, guaranteeing assistance to this public from the discovery, to the treatment and prognosis.

Regarding the exclusion criteria: duplicated works and literature reviews, and works that do not correspond to the topic addressed.

The initial sample consisted of 61 articles (52 MEDLINE, 05 BDENF, 04 LILACS), then the following criteria were used: full text; language: Portuguese and English; time frame: year 2006 to 2024. A sample of 33 articles was then obtained (27 MEDLINE, 04 BDENF, 02 LILACS). Applying the inclusion and exclusion criteria to evaluate the studies found, 07 were related to the objective, 26 were not related to the topic. Having a final sample of 07 articles for analysis.

To better understand the search process, a table was created with the search, filtering and criteria application stages.

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| TABLE 3- Number of studies identified in the databases. |                        |   |  |                  |  |
|---|------------------------|---|--|------------------|--|
| DATABASE  | TOTAL STUDIES<br>FOUND | TOTAL STUDIES<br>FOUND AFTER<br>APPLYING CRITERIA | STUDIES EXCLUDED FOR BEING DUPLICATES AND NOT MEETING THE CRITERIA | SELECTED STUDIES |  |
| MEDLINE   | 52                     | 27  | 23   | 4                |  |
| LILACS  | 4                      | 2   | 1  | 1                |  |
| BDENF-<br>Nursing                                       | 5                      | 4   | 2  | 2                |  |
| Total   | 61                     | 33  | 26   | 7                |  |

Source: Research data, 2024.

The articles were initially selected by evaluating the abstracts. Then, a second analysis was performed with a thorough reading of the previously selected studies to determine whether to include or exclude the publications, following the previously established criteria for selecting the studies.

In this way, it was investigated whether the articles were appropriate for the object of study and/or guiding question. The final sample for the composition of this RIL was composed of 7 articles, which were also used to prepare the research discussions.

The in-depth analysis of the articles required reading and re-reading of the selected articles in order to obtain greater depth in data collection. For this purpose, an adapted data collection form was used to guide the reading and collaborate in data extraction, which was adapted from the collection instrument model developed and validated. (11)

Thematic category analysis of the content will be used. It is divided into three parts, which are initially correlated. The first phase is the pre-analysis, the second refers to the exploration of the material and finally the last stage, the processing of the results.(12)

The pre-analysis phase involves reading extensively all the content that will be covered. This first stage is characterized by filtering the content that best fits the study, as well as recapitulating more specific objectives and hypotheses. For a better understanding and interpretation of the final study, the researcher must be aware of the analysis stages and their interrelations, emphasizing the use of indicators to promote better organization and management of information. Other points of analysis must be performed consistently, such as: fluent reading, organization of the body of the text, and formulation and reorganization of objectives and hypotheses. (12)

The second stage, corresponding to the exploration of the material, involves the selection of classification criteria for the collected data and the ability to classify them correctly. This stage needs to be described more carefully and precisely because the choice of a classification criterion does not guarantee a deeper or broader description. (12)

It ends with the third stage, which corresponds to the decision processing phase, which is the process of altering and refining all the data collected, with the aim of making them more specific and truthful. Therefore, it offers the opportunity to acquire new knowledge and establish a correlation between reality and theory. (12)

RESULTS

From the search for studies in the database, it was possible to obtain 61 articles. Therefore, after applying the pre-established criteria, 28 articles were excluded, leaving 33 articles. However, after reading the titles and abstracts, 26 articles were excluded because they did not meet the eligibility criteria. In short, 07 articles from the databases were included to compose the sample of this study.

The characterization of the studies was carried out based on the year of publication, title, author(s), objectives and main results of the research (Table 3).

| TABLE 4– Summary of s | selected articles according to year, t   | citle, author(s), objectives, ai  | nd main research results, 2024   |   |
|-----------------------|--|-----------------------------------|--|---|
| YEAR                  | TITLE  | AUTHORS                           | OBJECTIVE(S)   | RESULTS   |
| 2021                  | Women's experiences<br>regarding their paths to the<br>diagnosis of endometriosis<br>(Experiências das mulheres<br>quanto às suas trajetórias<br>até o diagnóstico de endo-<br>metriose) | Silva et al <sup>(3)</sup>        | To describe women's experiences regarding their journeys from the onset of symptoms to the diagnosis of endometriosis.   | Without a diagnosis of endometriosis, women experience severe symptoms from menarche onwards. This situation has a negative impact on different areas of their lives, including the devaluation of their complaints in their social circles. Thus, the importance of a support network in this situation is understandable. In this context, women visit several professionals until they receive a definitive diagnosis. |
| 2023                  | The Relation between<br>Patient- Centered Care and<br>Quality of Life in Women<br>with Endomet riosis  | Schreurs<br>et al <sup>(13)</sup> | The aim of this study was to examine the hypothesis that experiences with patient- centered endometriosis care are related to endometriosis-specific quality of life dimensions "emotional well-being" and "social support." | Participating women had a mean age of 35.7 years and were predominantly diagnosed with moderate to severe endometriosis. None of the relationships between patient-centered endometriosis care and the EHP-30 "emotional well-being" domain were significant.   |

|      |  |                                   |  | Three dimensions of patient-centered endometriosis care were significantly related to the EHP-30 "social support" domain: "information, communication, and education" (p < 0.001, beta = 0.436), "coordination and integration of care" (p = 0.001, beta = 0.307), and "emotional support and alleviation of fear and anxiety" (p = 0.002, beta = 0.259).  |
|------|--|-----------------------------------|--|--|
| 2021 | Improving<br>Patient- Centredn ess in<br>Endomet riosis Care: A Study<br>Protocol for a Prospecti<br>ve Study with a Mixed-<br>Methods Approac h | Schreurs<br>et al <sup>(14)</sup> | This study aimed to improve patient-centered endometriosis care. | This protocol presents a prospective study with a mixed-methods approach to improve patient-centeredness in endometriosis treatment. The study consists of 5 steps: (1) assess current patient-centeredness in endometriosis treatment using the ECQ, (2) understand improvement goals, (3) develop an improvement plan, (4) implement improvements, and (5) assess increased patient-centeredness in endometriosis treatment. |

|      |  |                                    |   | The final evaluation will be performed 1.5 years after im- plementation of the improvement plan.   |
|------|--|------------------------------------|---|--|
| 2018 | The association between experien ces with patient-centred care and health-related quality of life in women with endomet riosis | Apers <i>et al</i> <sup>(15)</sup> | To quantitatively examine how women's experiences with patient-centered endometriosis care (PCEC) relate to their HRQoL (Health-Related Quality of Life). | Of the 194 patients invited to participate, 109 agreed (response rate 56%). Patient characteristics are detailed in Table 2. Patients had a mean age of 35.4 years and the majority were of European ethnic origin (91.1%) and had an intimate partner (93.6%). Approximately half of the patients had a university degree (51.4%), while only a minority of the sample were members of an endometriosis patient association (21.1%). Most patients reported having a moderate to severe degree of endometriosis (79.6%) and had experienced endometriosis related symptoms (fertility problems, dysmenorrhea, dyspareunia, lower abdominal pain, or both, while not menstruating) during the past year (89.0%). The patients' first symptoms of endometriosis |

|      |  |                                   |  | occurred at a mean age of 26.6 years. After the first symptoms, patients waited an average of 1.8 years to see a doctor and took an average of 4.2 years to reach a diagnosis. Furthermore, 58.7% of the patients had previously been pregnant. However, most patients had tried to get pregnant for more than 12 months without success (70.4%) and wanted to have (more) children in the future (75.5%). Endometrial-related pain made it impossible for almost a third (27.9%) of the patients to consider getting pregnant. |
|------|--|-----------------------------------|--|---|
| 2021 | Early identification of women<br>with endometriosis by<br>means of a simple patient-<br>completed questionnaire<br>screening tool: a diagnostic<br>study | Fauconnier et. al <sup>(16)</sup> | To evaluate the value of a self-administered questionnaire based on patients' verbal descriptors of pelvic pain symptoms to identify women with endometriosis. | A total of 105 cases and 197 controls were included (45 asymptomatic consultation- based controls, 66 women without endometriosis consulting for pain/ infertility, and 86 population- based controls). The full set of questions in the predictive model, including age, had an area under the receiver operator characteristic curve of 0.92  |

|      |   |                                |  | (95% confidence interval, 0.87–0.95) after internal validation. The high-risk classification rule had a specification of 98.0% and a positive likelihood ratio of 30.5. The low-risk classification rule had a sensitivity of 98.1% and a negative likelihood ratio of 0.03. For a hypothesized pre-test with a prevalence of 10%, the highand low-risk prediction rules confirm endometriosis with a post-test probability of 77.2% and 0.3%, respectively. |
|------|---|--------------------------------|--|--|
| 2012 | Archetypes of the essential nursing data set for the care of endometriosis patients. (Arquétipos do conjunto de dados essenciais de enfermagem para atendimento de portadoras de endometriose.) | Spigolon, Moro <sup>(18)</sup> | The objective was to develop a Set of Essential Nursing Data for Care for Endometriosis Sufferers (CDEEPE - Conjunto de Dados Essenciais de Enfermagem para Atendimento às Portadoras de Endometriose) and represent it by archetypes. | This study made it possible to identify important information for nursing practice, contributing to the computerization and application of the Nursing Process in the care provided to women with Endometriosis.   |

Source: Research data, 2024.

The selected studies, in their vast majority, emphasize Endometriosis as a still unknown pathology, which affects the female population, especially the signs and symptoms presented by them. They question the challenges and perspectives of health care provided to women with the condition, in addition, they also address the role of Nursing in the care and assistance provided to the affected female population.

From the reading and analysis of the articles presented in Table 3, it was possible to unite the results by similar content, thus constructing the following categories: 1- Endometriosis as a public health problem; 2- The importance of the Nurse's role in the diagnosis and treatment of Endometriosis sufferers.

Given this scenario, reflections continue on the categories developed in this research, based on data from the

articles analyzed and which received greater emphasis throughout the study.

# **DISCUSSION**

# Endometriosis as a public health problem

Endometriosis is an important diagnosis that deserves special attention, as it is a gynecological condition that affects approximately 10 to 15% of

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women of reproductive age worldwide. This condition is prevalent, its origin is uncertain, and it presents chronic characteristics and morbidity. (3) (Silva et al, 2021).

This condition is seen as a public health challenge in Brazil. It is estimated that around seven million Brazilian women suffer from Endometriosis nationwide. One of the justifiable factors is the lack of knowledge about this condition among both patients and health professionals, which negatively impacts the identification and treatment of affected women. (19)

The classification of a disease should allow the correlation of important results, such as treatment, prognosis and follow-up, as well as the stages of the disease. Currently, the most common way to classify endometriosis is that proposed by the American Society for Reproductive Medicine (ASRM), formerly known as the American Fertility Society (AFS). According to this classification system, the disease is defined based on the size, appearance and depth of the implants, the presence of adhesions and the blockage of the cul-de-sac of Douglas. Through this evaluation, the patient is scored, determining the stage of the disease - minimal, mild, moderate or severe. Other authors describe endometriosis based on its morphological characteristics. This classification is widely known, and can thus divide endometriosis into three distinct categories: peritoneal, characterized by implants on the peritoneal surface; ovarian, which presents endometriomas; and deep, in which the implants penetrate to a minimum depth of 5 mm and cause muscular hyperplasia below the peritoneum. (20)

Due to its peculiarities, in 2006 the Brazilian Ministry of Health established a clinical protocol and therapeutic guidelines for the treatment of endometriosis, which were reviewed and updated in 2010 through Ordinance SAS/MS No. 144. (21)

In this sense, a prospective study with a mixed methods approach considers the possible relationship between the quality of endometriosis treatment and the well-being of women affected by this condition, especially with regard to psychological, social and sexual aspects, making it essential to improve care aimed at this health problem. (13)

With that in mind, it is important to note that there are currently no proven interventions to improve patient-centeredness in the treatment of endometriosis. In addition to prioritizing patient-centered care, the search for a cure for endometriosis remains crucial. Studies have shown that the presence of endometriosis symptoms over the past year was significantly related to health-related quality of life across all settings. These results are in line with recent research indicating that women with endometriosis without symptoms had similar levels of psychosocial well--being compared to healthy women without the condition, while those with symptoms had worse psychosocial functioning. (15)

In view of the above, it is essential to understand the profile of the patients monitored in this study, as well as the particularities of their lesions and the results obtained with surgical interventions.

Currently, there are few studies in the literature that address this topic, especially at the national and regional level. Few and practically unknown are the studies that focus on evaluating the quality of referral services for endometriosis. Therefore, studies that can be carried out in the long term and consider the entire diagnostic and treatment process, including clinical and surgical options, in addition to the fertility of patients after treatment, will certainly contribute to confirming therapeutic advances in the treatment of endometriosis. These studies are essential to ensure excellence in the care provided to patients.

# The importance of the role of nurses in the diagnosis and treatment of women with endometriosis

Nursing professionals can help identify possible cases of Endometriosis during nursing consultations, a crucial moment in the care process. Nursing consultations, used as a tool for implementing nursing care, consist of five stages. Among them, data collection and health history stand out, where signs and symptoms of the pathology can be observed. During the gynecological examination, it is possible to identify pain when performing movements in the uterine region, cervix and annexes.

The importance of nursing consultation for holistic care of women is highlighted. It is observed that the bond formed between nurse and patient during nursing consultations in the BHU allows greater attention to the needs of women, enabling more humanized care and the possibility of identifying problems that most of the time are not reported without a greater bond. (23)

In Brazil, finding nursing professionals capable of assisting women with endometriosis is a challenge, since historically the focus of nurses' work has been more on issues related to pregnancy and childbirth. In contrast, in other nations, providing this type of care is valued and recognized as essential. (18)

Effective treatment of endometriosis goes far beyond the initial diagnosis. An individualized, multidisciplinary approach is essential to ensure patients receive the best possible care and to comprehensively address symptoms, aiming not only to alleviate discomfort but also to improve quality of life and prevent disease progression. (17)

The ECQ questionnaire appears to be a promising tool for assessing patient-centeredness in endometriosis care. By measuring both the performance and importance of different aspects of patient-centered care, the ECQ provides a comprehensive view

of how health services are meeting the needs and preferences of women with endometriosis. (14).

The fact that the ECQ has been validated and used in several Dutch-speaking endometriosis patient populations suggests its effectiveness and usefulness in different healthcare settings. This may be especially important as different cultures and healthcare systems may have varying approaches to treating endometriosis. (14)

In this sense, a clinical prediction model was developed with two simple classification rules of "yes" or "no". The first rule, low risk, excludes the diagnosis of endometriosis with high accuracy even in a population with moderate prevalence. The second rule, high risk, confirms the diagnosis of endometriosis with high reliability even in a population with low prevalence. These classification rules may be useful for detecting endometriosis in women of childbearing age in the general population or in primary care. (16)

This individualized approach recognizes that each patient may have unique needs and preferences, and that a treatment that works for one person may not be effective for another. Therefore, it is crucial to involve a team of healthcare professionals who can offer a variety of treatment options and support patients throughout their care journey. In addition, ongoing patient education and support are key to helping manage symptoms, promote self-care, and make informed decisions about long-term

Therefore, assessment and triage by nurses play a crucial role in the identification and early diagnosis of endometriosis. As part of their role, nurses are well placed to provide education, guidance and support to women suffering from this condition. By using appropriate data collection tools, such as symptom questionnaires, medical history and specific physical examinations, nurses can contribute significantly to the quality of care and informed decision-making.

By using the strategies used by the authors above, healthcare professionals can identify areas for improvement in care and adapt their practices to better meet the needs of patients with endometriosis. This may include aspects such as effective communication, patient involvement in treatment decisions, access to information and support, among others. In summary, the use of the ECQ questionnaire represents a significant advance in the assessment and promotion of patient--centered care in the treatment of endometriosis, contributing to a more holistic and personalized approach to the management of this health condition.

Therefore, by integrating assessment, screening and use of data collection tools into their clinical practice, nurses can play an essential role in the effective management of endometriosis and in supporting women affected by this condition.

# **CONCLUSION**

Through the results and discussions, it is possible to identify the importance of Nursing in the diagnosis and treatment of women with Endometriosis, as well as highlighting the management of the multidisciplinary team's performance in view of the particularities presented by this public.

This study provided the identification of some difficulties and characteristics associated with the work of Nurses with women with endometriosis, from their first consultations and visits to the UBS until the diagnosis is made, which as we know is difficult for medical professionals to make and also because the pathology itself is confused with other diseases.

The literature highlights that throughout the procedure, the presence of the nursing team is essential, as they stand out for their proximity to the patient, understanding of the practices involved and commitment to encou-

raging female autonomy based on the values of equity and humanization. In this way, the team seeks to promote health and well-being, meeting all of the essential human needs of women..

In this study, we encountered some difficulties due to the lack of research in the national literature on the role of Nursing in the care of women with Endometriosis, which made it impossible to conduct a more robust analysis of the results. Challenges were observed such as the feeling of helplessness and lack of preparation in the face of the particularities of care, resulting from the lack of professional training, in addition to dealing with the suffering of

As a limitation of this study, it was possible to identify deprivations of articles that address the topic in a way that helps professionals or academics in the area to understand what permeates the Care for Women with Endometriosis, as well as the role of the nurse and the importance of their work for this audience.

Therefore, it is suggested that new research be carried out to address this lack of literature with the aim of identifying the best scientific evidence to advance care for women with endometriosis to meet their physical, psychological, social and spiritual needs during the pregnancy-puerperal life cycle.

The practices related to their care involve symptom control, patient safety, team management, technical procedures, therapeutic plan, implementation of educational practices, effective communication, emotional support and complementary therapies, all provided in a personalized way according to the needs presented by the woman and throughout her life.

It is important to emphasize that this is a current pathology, as the incidence of this disease has been increasing, making women's health care even more challenging in the face of various social and economic restrictions, and should therefore be discussed by the scientific community.

Francisca J. G. Martins , Adryelle S. Lima, Riani J. N. Nóbrega, Rayanne De S. Barbosa, Clélia P. da S. Limeira, Juliana A. P. Sa Barreto, Kayan L. Barbosa, Charlineide J. Silva Assistência de enfermagem à mulheres com endometriose: revisão integrativa

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