



ENDOMETRIOSIS

Endometriosis is an oestrogen-dependent chronic inflammatory condition where cells similar to those that line the uterus (endometrium) grow in other part of the body, most commonly within the pelvis. Endometriosis is a frequent cause of dysmenorrhea and pelvic pain, and it may cause infertility.

Even though there is currently no direct evidence that a certain diet or lifestyle can reduce the severity of endometriosis, diet has shown to affect several processes related to the endometriosis such as inflammation, prostaglandin metabolism and oestrogen activity and therefore may be beneficial alongside traditional treatment to assist women with endometriosis to manage their symptoms.

Dietary fibre



Consuming adequate dietary fibre can help to lower the amount of oestrogen in the body. Fibre, particularly soluble fibre, binds to oestrogen in the digestive tract, increasing faecal excretion. Additionally, fibre increases binding of oestrogen to sex hormone binding globulin (SHBG), lowering the bioavailability of oestrogen.

It is recommended that women aim to include 25 grams of fibre per day.

Good sources of fibre include:

- Wholegrain breads and cereals
- Lentils and legumes (such as chickpeas and beans)
- Fruit and vegetables
- · Nuts and seeds
- · Psyllium husk

Antioxidants



Although the pathogenesis of endometriosis is not completely understood, the disease is associated with oxidative stress and an abnormal increase in reactive oxygen species (ROS). Antioxidants neutralise the effects of ROS, therefore reducing inflammation.

Eat a variety of antioxidant-rich food may be beneficial.

Good sources of antioxidants include:

- Fruits and vegetables, especially dark and brightly coloured varieties
- Extra virgin olive oil
- Nuts and seeds

Omega-3 Fatty Acids



Omega-3 fatty acids act as anti-inflammatories in the body. In endometriosis, these anti-inflammatory actions reduce the production of pro-inflammatory prostaglandins.

Increasing intake of omega-3 fatty acids and reducing intake of omega-6 fatty acids may be beneficial. Good sources of omega 3 fatty acids:

- Fish and other seafood (especially oily fish such as salmon, trout, mackerel and sardines)
- Nuts and seeds (such as flaxseed, chia seeds and walnuts)

Low FODMAP Diet



Women with endometriosis are 2.5 times more likely to have IBS and there has been increasing interest in the notion that visceral hypersensitivity may be a common denominator between IBS and endometriosis. The Low FODMAP Diet, which reduces the load of fermentable carbohydrates in the diet, has shown to improve bowel symptoms in women with IBS and endometriosis.

The Low FODMAP Diet should be conducted under supervision of an Accredited Practising Dietitian.