



## ROLE OF NURSING IN RELATION TO ENDOMETRIOSIS AND DEPRESSION CARRIERS

### PAPEL DA ENFERMAGEM FRENTE A PORTADORAS DE ENDOMETRIOSE E DEPRESSÃO PAPEL DE LA ENFERMERÍA FRENTE A PORTADORAS DE ENDOMETRIOSIS Y DEPRESIÓN

Thâmara Silva Bezerra de Souza<sup>1</sup>, Nathália Patricia Almeida Santos<sup>2</sup>, Joyci Larissa Sousa Mota<sup>3</sup>, Melliny Vibelly da Silva<sup>4</sup>, Nathália França da Silva<sup>5</sup>, Raquel Bezerra dos Santos<sup>6</sup>

#### ABSTRACT

**Objective:** to analyze the importance of the role of nursing in relation to women with endometriosis affected by depression. **Methods:** this is a bibliographical study, type integrative, with search in the LILACS, BDENF, MEDLINE and IBICS databases. Trilingual articles were selected in full, from 2008 to September 2018. Information was collected from an instrument, the results were presented by figures and discussed with the literature. **Results:** eight papers were selected for analysis. The importance of the role of nurses in coping with endometriosis associated with disorders of depression has been shown. It is known that endometriosis affects the daily life of women, hindering their daily activities, their personal relationships and interfering in their reproductive capacity. It further compromises quality of life as symptoms become more severe. **Conclusion:** it is concluded that, in order to improve the quality of life of women with endometriosis, nurses must guarantee the knowledge and empowerment of women so that suffering is reduced. **Descriptors:** Endometriosis; Nursing Care; Depression, Nursing; Quality of life; Woman's Health.

#### RESUMO

**Objetivo:** analisar a importância do papel da Enfermagem em relação a mulheres portadoras de endometriose acometidas por depressão. **Métodos:** trata-se um estudo bibliográfico, tipo revisão integrativa, com busca nas bases de dados LILACS, BDENF, MEDLINE e IBICS. Selecionaram-se artigos trilingües na íntegra, no período de 2008 a setembro de 2018. Coletaram-se as informações a partir de um instrumento, apresentaram-se os resultados por meio de figuras e os discutiram com a literatura. **Resultados:** selecionaram-se oito artigos para análise. Mostrou-se a importância do papel do enfermeiro no enfrentamento da endometriose associada aos distúrbios de depressão. Sabe-se que a endometriose afeta a vida cotidiana das mulheres, dificultando as suas atividades diárias, as suas relações pessoais e interferindo na sua capacidade reprodutiva. Compromete-se, ainda mais, a qualidade de vida à medida que os sintomas se tornam mais graves. **Conclusão:** conclui-se que, para melhorar a qualidade de vida da mulher portadora de endometriose, o enfermeiro deve garantir o conhecimento e o empoderamento das mulheres para que o sofrimento seja amenizado. **Descritores:** Endometriose; Assistência de Enfermagem; Depressão, Enfermagem; Qualidade de vida; Saúde da Mulher;

#### RESUMEN

**Objetivo:** analizar la importancia del papel de la enfermería en relación a mujeres portadoras de endometriosis acometidas por depresión. **Métodos:** se trata de un estudio bibliográfico, tipo revisión integrativa, con búsqueda en las bases de datos LILACS, BDENF, MEDLINE e IBICS. Se seleccionaron artículos trilingües en su totalidad, en el período de 2008 a septiembre de 2018. Se recogen las informaciones a partir de un instrumento, se presentaron los resultados por medio de figuras y los discutieron con la literatura. **Resultados:** se seleccionaron ocho artículos para análisis. Se mostró la importancia del papel del enfermero en el enfrentamiento de la endometriosis asociada a los disturbios de depresión. Se sabe que la endometriosis afecta la vida cotidiana de las mujeres, dificultando sus actividades diarias, sus relaciones personales e interfiriendo en su capacidad reproductiva. Se compromete, aún más, la calidad de vida a medida que los síntomas se vuelven más graves. **Conclusión:** se concluye que, para mejorar la calidad de vida de la mujer portadora de endometriosis, el enfermero debe garantizar el conocimiento y el empoderamiento de las mujeres para que el sufrimiento sea amenizado. **Descriptores:** Endometriosis; Asistencia de Enfermería; Depresión, Enfermería; Calidad de Vida; Salud de la Mujer.

<sup>1,2,3,4,5</sup>Nurses, Tabosa de Almeida University Center / ASCES-UNITA. Caruaru (PE), Brazil. Email: [thambez@gmail.com](mailto:thambez@gmail.com) ORCID iD: <https://orcid.org/0000-0002-9850-8608>; Email: [nathaliapatricia.as@gmail.com](mailto:nathaliapatricia.as@gmail.com) ORCID iD: <https://orcid.org/0000-0002-0891-3950>; Email: [motajoyci@gmail.com](mailto:motajoyci@gmail.com) ORCID iD: <https://orcid.org/0000-0002-8319-8993>; Email: [mellinyvibelly16@gmail.com](mailto:mellinyvibelly16@gmail.com) ORCID iD: <https://orcid.org/0000-0001-6322-1132>; Email: [francanathaliasilva@gmail.com](mailto:francanathaliasilva@gmail.com) ORCID iD: <https://orcid.org/0000-0001-9395-0299>; [cynthiamiranda14@gmail.com](mailto:cynthiamiranda14@gmail.com) ORCID iD: <https://orcid.org/0000-0002-4967-6779>; <sup>6</sup>Master, Federal University of Pernambuco / UFPE. Caruaru (PE), Brazil. Email: [raquelsantos@asces.edu.br](mailto:raquelsantos@asces.edu.br) ORCID iD: <https://orcid.org/0000-0002-9730-4718>

## INTRODUCTION

It is known that endometriosis is a chronic inflammatory gynecological condition, defined by the implantation of endometrial tissue outside the uterine cavity, which affects women in the reproductive phase, affects more than six million people in the world and whose prevalence is around 10% a 15%.<sup>1</sup>

It is a common and multifactorial condition which is still poorly understood.<sup>1</sup> It is observed that the signs and symptoms are usually variable, the disease can be asymptomatic or cause severe dysmenorrhea, deep dyspareunia, chronic pelvic pain, ovulatory pain, urinary symptoms or perimenstrual bowel movements, chronic fatigue and infertility.<sup>2</sup> Frequent signs and symptoms were perceived due to clinical condition; in relation to the drug treatment, there is a great impact on the professional, conjugal, reproductive and social life of the women with this pathology, being very common the appearance and the identification of high levels of depression.<sup>2</sup>

It was observed in one study that these symptoms usually appear later than when compared to those cited. It has been identified that the symptom most associated with depressive states, as well as the increase of the prostaglandins, that raises the risk of abortion, is the infertility.<sup>3</sup>

It was understood, therefore, that due to the complexity of the etiology and the manifestation of the pathology, there is a reduction of the quality of life of the patients. It is necessary, therefore, that the quality of life is a crucial aspect observed throughout the process of treatment of the disease.<sup>4</sup>

Therefore, it is essential to have a multidimensional approach to the integral health of women with endometriosis so that they contribute to the amelioration of symptoms, without losing quality of life.<sup>5</sup>

It is considered, in this sense, of utmost importance, the assistance of the nurse in an integral way, without focusing only on the physical and laboratory findings, since taking care of the emotional symptoms, besides the physical ones, can result in great benefits, making the therapeutic process more assertive, that is, the holistic view is fundamental in the care provided by the Nursing team.<sup>6</sup>

## OBJECTIVE

- To analyze the importance of the role of nursing in relation to women with endometriosis affected by depression.

## METHOD

It is a bibliographical study, type integrative review, in the period from 2008 to 2018. Six stages were carried out: identification of the problem and definition of the guiding question; accomplishment of the search and selection of studies according to inclusion criteria; data extraction; critical analysis of the selected studies; interpretation of the results and elaboration of the synthesis of the data with consequent presentation of the results.<sup>7</sup>

It was defined as a guiding question: what is the importance of the role of nurses in the care of women with endometriosis and depression?

As a search strategy, the Latin American Literature (LILACS) and Nursing Databases (BDENF) were used. The following descriptors were cross-labeled with the Boolean marker "and": Endometriosis; Nursing care; Depression; Nursing; Quality of life and Psychology, which are part of the Descriptors in Health Sciences (DeCS). The following databases were selected for the selection of articles: Latin American Literature (LILACS), Nursing Databases (BDENF) and Online System of Search and Analysis of Medical Literature (MEDLINE) minimizing the biases in this step.

The following inclusion criteria were chosen: articles published in Portuguese, English and Spanish, available in full, published between 2008 and 2018, in the form of a scientific article. The exclusion criteria were: articles in which it was not possible to identify a relationship with the topic by reading the title and abstract, articles that were repeated in databases, review articles, monographs and theses.

It should be emphasized that the research was carried out by two reviewers, independently, until an agreement was reached after the comparison of the different results. The information was then collected from the instrument proposed by Ursi, with level 1 of evidence, which includes the following items: identification of the original article; methodological characteristics of the study and evaluation of methodological rigor, applied interventions and results, among other information. The results were presented and the data were discussed descriptively and through the construction of synoptic tables (Figure 2), covering the following aspects: name of the research, authors, design and recommendations / conclusions.<sup>8</sup>

A number of articles were reached through careful reading of titles, abstracts and

themes. The inclusion or exclusion of these publications were defined according to the objectives of the research and the relationship with the guiding question.

The instrument for scientific articles included in the inclusion criteria was used to meet methodological rigor. Data was collected in an adapted and structured way using Microsoft Office Word, version 2010. The following pertinent aspects were considered: database, article title, authors name, year of

publication, methods and results/discussion of the research.

The flowchart (Figure 1) was elaborated for the selection of articles, with the following steps: identification of the articles in the respective databases; screening (related to repeated titles and unrelated topics); reading of abstracts and eligibility (inclusion and exclusion after reading in full). Subsequently, the relevant information in articles.

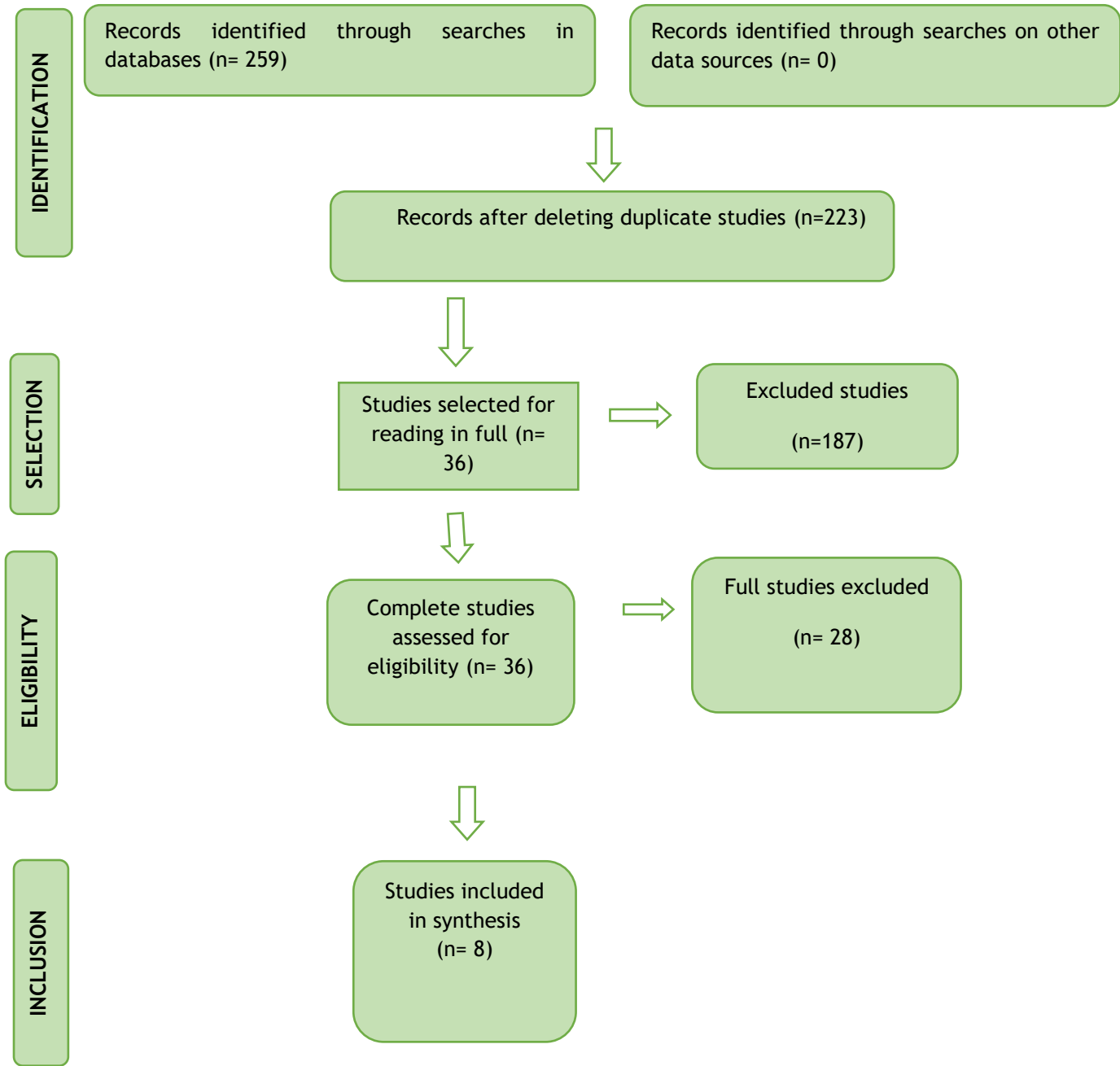


Figure 1. Flowchart of the selection of articles for the integrative review adapted from the PRISMA 2009 model. Caruaru (PE), Brazil, 2018.

RESULTS

230 articles were identified in MEDLINE, but only five were selected. Two of the 28 articles found were chosen from the LILACS database. An article was found in the BDNF and it was used. In this review, eight articles were observed that met the inclusion criteria.

List the journals published in the articles included in the review: " Einstein São Paulo Journal", "Gaúcha Nursing Journal", "Brazilian Journal of Gynecology and Obstetrics", "Latin-English/Portuguese

American Nursing Journal", *European Journal of Obstetrics & Gynecology and Reproductive Biology*, *J. An Acad Nurse Pract*, *J. Endocrinol Invest* and *Pain Res Manag*.

The type of research design of the studies evaluated were defined: retrospective, exploratory, qualitative, documental, prospective and exploratory cohort, retrospective and comparative, prospective and observational, of a transversal nature, as shown in Figure 2. Data Base	Title	Authors	Year	Method	Results	
	MEDLINE	Analysis of psychopathological comorbidity behind the common signs and symptoms of endometriosis	Lagana AS, Conemi I, Retto G, Muscatello MRA, Bruno A, Zoccali RA, Triolo O Cedro C.	2015	Prospective cohort survey	The study shows that women with endometriosis are more likely to develop depression, sensitivity and anxiety than women without the disease.
	LILACS	Patients with endometriosis using positive coping strategies have less depression, stress and pelvic pain	Donatti L, Ramos DG, Andres MP, Passman LJ, Podgaec S.	2017	Exploratory and prospective research	There is an association between the coping strategy, the level of stress and the intensity of pain in patients with endometriosis, since the latter two can lead to depression. Therefore, the clinical treatment of the disease should include both clinical and psychic symptoms.
	BDENF	Essential arithmetic data archetypes for care of endometriosis carriers	Spingolon DN, Moro CMC	2012	Exploratory research	The CDEEPE contemplates necessary and important information in Nursing practice contributing to the computerization of RES and the application of the Nursing process in the care provided to endometriosis patients.
	MEDLINE	Diagnosis and management of endometriosis: the role of the advanced practice nurse in primary care	Mao A, Anastasi J.	2008	Documentary research	Endometriosis is defined as a chronic, progressive medical condition with a multitude of physical or psychological symptoms. Often, these are confused with other differential diagnoses. For this reason, endometriosis can be difficult to diagnose and, if left untreated, may evolve from small lesions in the pelvic organs to large ovarian endometriomas and extensive fibrosis with adhesions, making it essential to accurately diagnose the disease.
MEDLINE	Comparative, open-label prospective study	Caruso S, Fava V, Cianci S,	2016	Retrospective and	This is a comparative study performed with a	

	on the quality of life and sexual function of women affected by endometriosis-associated pelvic pain on 2 mg dienogest/30 µg ethinyl estradiol continuous or 21/7 regimen oral contraceptive	Cianci A.		comparative research	group of 63 women. The patients were divided into distinct groups, whose objective was to relate the use of contraceptive medications and the reduction of pelvic pain and sexual suffering, favoring the quality of life and the improvement of the sexual function of women affected by endometriosis. It was concluded that there was a significant reduction of pelvic pain in the group that used the medications.
LILACS	Histological classification and quality of life in women with endometriosis	Porto Ribeiro Galvão Sekula Aldrigui Ribeiro	BTC, HSAA, MAL, VG, JM, PAA.	2015 Observational research, of a cross-sectional nature	Deep endometriosis has a significant impact on quality of life. Among the histological types and the sites of endometriosis involvement, the GI type was identified with greater frequency, this being the one of better response to the surgical treatment.
MEDLINE	Clinicians' perceptions of women's experiences of endometriosis and of psychosocial care for endometriosis	Young K, Fisher J, Kirkman M.		2017 Qualitative research	It is understood that endometriosis is an inflammatory condition and is associated with infertility. However, their evidence is unclear. It may be a potential cause of some comorbidities, such as asthma and migraine, and has no known cure. As a treatment for symptom reduction, there is the surgical option and hormone therapy. There are studies and evidence on the serious psychological consequences of endometriosis. It was found that women with this pathology present a reduction in quality of life, mental health and professional well-being.
MEDLINE	Assessment of pain and stress intensity among women with ovarian endometriomas versus teratomas	Wierzchowska K, Kampioni M, Wilczac M, Sajdak S, Opala T.		2015 Prospective research	It is known that ovarian endometriomas can cause pain because of its endometrial tissue component. In evaluations of patients with endometriomas and with teratomas, it was observed that patients with pain related to the lower pelvis are more intense, however, they



reveal lower levels of stress, unlike patients with ovarian teratomas, who have high levels of stress.

Figure 2. Type of research design of the studies evaluated. Caruaru (PE), Brazil, 2018.

## DISCUSSION

It is emphasized in some studies that endometriosis is a comorbidity that affects thousands of women of reproductive age. It is characterized by the presence of endometrial tissue in other regions of the body, usually in the pelvic region, which leads to a chronic inflammatory reaction.<sup>9</sup>

In patients with endometriosis, the association of signs and symptoms such as pelvic pain, dysmenorrhoea, deep pelvic dyspareunia, dyschezia, low back pain and infertility is evidenced. It is understood that, for an effective treatment, it is necessary, besides the immediate diagnosis, an individualized and multiprofessional approach in order to reduce the symptoms and promote the quality of life, thus preventing the progression of the disease.<sup>10</sup>

However, studies indicate that endometriosis does not only affect physical health, but that diagnosis and experience with the disease can involve a number of dimensions such as the emotional, marital, sexual, professional, and psychological life of the woman. It is noticed that the discovery of the disease becomes an emotional landmark for the patient, highlighting the rapid and precise diagnosis as fundamental to alleviate the suffering and anguish resulting from waiting for answers and treatment plans.<sup>11</sup>

It is noted that the clinical condition, the treatment and its consequences contribute to the emergence of depression, anxiety and emotional stress in patients with endometriosis, with a specific emphasis on depression. It is pointed out by data that it is a significant comorbidity that requires special care, since depression can intensify the subjective perception of pain, as well as the subsequent sufferings.<sup>12</sup>

It is understood that, in addition to affecting mental health, with the appearance of depressive symptoms and anxiety, endometriosis interferes strongly in the sexual life of women, therefore, the treatment should be based on the symptoms, being the early diagnosis essential to decrease the pain and prevent the progression of the disease, as well as preserve future fertility, as with the evolution of the condition, the symptoms become more serious and the quality of life is

even more compromised. It should be emphasized, therefore, that a complete evaluation of the clinical condition associated with endometriosis is a paramount parameter and must be performed before discussing any treatment.<sup>13</sup>

On the other hand, it was noted in another study that endometriosis does not necessarily negatively affect the quality of life of its patients, since, despite the fact that the pathology causes, in most cases, a high level of stress and interfere directly in social well-being, many women demonstrated a high level of satisfaction with life, including acceptance of the disease and allowing the development of good interpersonal relationships.<sup>14</sup>

It is considered that the appropriate evaluation and screening carried out by the nurse significantly facilitates the task of diagnosing endometriosis, since this professional has as its main role the promotion of education, guidance and support for women carriers, helping to ease the consequences of the disease. It is observed that the use of data collection instruments contributes to the quality of care, as well as to decision making.<sup>15</sup>

It has been shown that, despite numerous advances in the early detection and the possibility of symptom relief, endometriosis is still far from being cured, and there are only palliative treatments, such as surgeries and hormonal therapies, which ease the symptoms, but which are configured as long-term treatments, generating permanent discomfort in the lives of newly diagnosed women, as well as those who reported a pre-existing diagnosis.<sup>16</sup>

The importance of providing information needed by patients about the disease process, diagnosis, current treatment options and the side effects of medications is emphasized. It is understood the fundamental role of nurses in education and health promotion, making it essential to cultivate partnerships with patients in order to optimize treatments.<sup>10</sup>

Finally, the importance of psychosocial care in relation to endometriosis is verified, since the pathology is a complication for the women who live with it, requiring care that covers more than the biological and that aim to meet the diverse demands of the psychosocial sphere, at a time when there is

no cure available for the condition. It is pointed out that comprehensive care, including the psychological and social dimensions, can facilitate a better assistance to women in the management of endometriosis throughout life.<sup>16</sup>

## CONCLUSION

It is understood that endometriosis affects the quality of life of the female carriers, it impedes the reproductive life, the personal relations and the daily activities. Several factors associated with coping with depression, such as stress levels, pain intensity and physiological factors of the disease, are identified. It is therefore essential for a significant improvement of the clinical picture, full knowledge of the patient's clinical history and treatment of the disease, which should include the psychic picture, with an approach to psychological, emotional and social signs and symptoms.

The importance of considering Nursing performance for women with endometriosis is emphasized, since the nurse must include health care actions to promote autonomy, knowledge and empowerment of patients, in the initiative of alleviate suffering and ensure the improvement in the quality of life of women.

It is argued that, although there is international research on the subject, more national scientific productions are needed that address the role of Nursing in the treatment of women who present the two pathologies studied - endometriosis and depression.

It is concluded that this study constitutes an important opportunity for the beginning of discussions about the different roles of nurses, as well as the techniques used to improve the quality of life of patients with endometriosis, taking into account the depressive symptoms associated with pathology.

## REFERENCES

1. Silva MPC, Medeiros BQ, Marqui ABT. Depressão e ansiedade em mulheres com endometriose: uma revisão crítica da literatura. *Interação Psicol.* 2016 May/Aug; 20(2):226-33.
2. Donatti L, Ramos DG, Andres MP, Passman LJ, Podgaec S. Patients with endometriosis using positive coping strategies have less depression, stress and pelvic pain. *Einstein.* 2017 Jan/Mar; 15(1):65-70. Doi: [10.1590/S1679-45082017AO3911](https://doi.org/10.1590/S1679-45082017AO3911)
3. Sousa TR, Queiroz AP, Baron RA, Sperandio FF. Prevalencia de sintomas en la endometriosis: revisión sistemática. *CES Med [Internet].* 2015 July/Dec [cited 2018 June 15]; 29(2):211-26. Available from: [http://www.scielo.org.co/scielo.php?script=sci\\_arttext&pid=S0120-87052015000200006](http://www.scielo.org.co/scielo.php?script=sci_arttext&pid=S0120-87052015000200006)
4. Minson FP, Abrão MS, Sardá Júnior J, Kraychete DC, Podgaec S, Assis FD. Importance of quality of life assessment in patients with endometriosis. *Rev Bras Ginecol Obstet.* 2012 Jan;34(1):11-5. Doi: <http://dx.doi.org/10.1590/S0100-72032012000100003>.
5. Daniela A, Drusyla J, Ricardo E, Araújo MZ. Saúde da mulher: endometriose: uma revisão literária. In: *II Congresso Brasileiro de Ciências da Saúde, 2007. Anais... II Congresso Brasileiro de Ciências da Saúde.* Centro de Convenções Raymundo Asfora Garden Hotel, Campina Grande (PB). Campina Grande: UEPB; 2007. Available from: [http://www.editorarealize.com.br/revistas/c\\_onbracis/trabalhos/TRABALHO\\_EV071\\_MD1\\_SA\\_4\\_ID1025\\_15052017231718.pdf](http://www.editorarealize.com.br/revistas/c_onbracis/trabalhos/TRABALHO_EV071_MD1_SA_4_ID1025_15052017231718.pdf)
6. Silva APCM, Cordeiro BMB, Soares CO, Vasconcelos AHR, Tavares CH. Nursing home of the women portadora of endometriose [Internet]. [2009] [cited 2018 June 15]. Available From: [http://artigos.netsaber.com.br/resumo\\_artigo\\_9066/artigo\\_sobre\\_acolhimento-de-enfermagem-a-mulher-portadora-de-endometriose](http://artigos.netsaber.com.br/resumo_artigo_9066/artigo_sobre_acolhimento-de-enfermagem-a-mulher-portadora-de-endometriose)
7. Ursi ES, Galvão CM. Perioperative prevention of skin injury: an integrative literature review. *Rev Latino-Am Enfermagem.* 2006 Jan/Feb;14(1):124-31. Doi: <http://dx.doi.org/10.1590/S0104-11692006000100017>
8. Lorenzetti J, Lanzoni GMM, Assuiti LFC, Pires DE, Ramos FRS. Health Management in Brazil: dialogue with public and private managers. *Texto contexto-enferm.* 2014 Apr/June 23(2):417-25. Doi: <http://dx.doi.org/10.1590/0104-07072014000290013>
9. Porto BTC, Ribeiro HSAA, Galvão MAL, Sekula VG, Aldrigui JM, Ribeiro PAA. Histological classification and quality of life in women with endometriosis. *Rev Bras Ginecol Obstet.* 2015; 37(2):87-93. DOI: [10.1590/S0100-720320140004650](https://doi.org/10.1590/S0100-720320140004650)
10. Mao AJ, Anastasi JK. Diagnosis and management of endometriosis: the role of the advanced practice nurse in primary care. *J Am Acad Nurse Pract.* 2010 Feb;22(2):109-16. Doi: [10.1111/j.1745-7599.2009.00475.x](https://doi.org/10.1111/j.1745-7599.2009.00475.x).
11. Donatti L, Ramos DG, Andres MP, Passman LJ, Podgaec S. Patients with endometriosis using positive coping strategies have less

- depression, stress and pelvic pain. *Einstein*. 2017 Jan/Mar; 15(1):65-70. Doi: [10.1590/S1679-45082017AO3911](https://doi.org/10.1590/S1679-45082017AO3911)
12. Lagana AS, Condemi I, Retto G, Muscatello MR, Bruno A, Zoccali RA, et al. Analysis of psychopathological comorbidity behind the common symptoms and signs of endometriosis. *Eur J Obstet Gynecol Reprod Biol*. 2015 Nov;194:30-3. Doi: [10.1016/j.ejogrb.2015.08.015](https://doi.org/10.1016/j.ejogrb.2015.08.015).
13. Caruso S, Iraci M, Cianci S, Fava V, Casella E, Cianci A. Comparative, open-label prospective study on the quality of life and sexual function of women affected by endometriosis-associated pelvic pain on 2 mg dienogest/30 µg ethinyl estradiol continuous or 21/7 regimen oral contraceptive. *J Endocrinol Invest*. 2016 Aug; 39(8):923-31. Doi: [10.1007/s40618-016-0460-6](https://doi.org/10.1007/s40618-016-0460-6)
14. Chmaj-Wierzchowska K, Kampioni M, Wilczac M, Sajdak S, Opala T. Assessment of pain and stress intensity among women with ovarian endometriomas versus teratomas. *Pain Res Manag*. 2015 May/June; 20(3):133-6. PMID: [25996765](https://pubmed.ncbi.nlm.nih.gov/25996765/)
15. Spigolon DN, Moro CMC. Essential data set's archetypes for nursing care of endometriosis patients. *Rev Gaúcha Enferm*. 2012 Dec;33(4):22-32. Doi: <http://dx.doi.org/10.1590/S1983-14472012000400003>
16. Young K, Fisher J, Kirkman M. Clinicians' perceptions of women's experiences of endometriosis and of psychosocial care for endometriosis. *Aust N Z J Obstet Gynaecol*. 2017 Feb; 57(1):87-92. Doi: [10.1111/ajo.12571](https://doi.org/10.1111/ajo.12571)

Submission: 2018/10/15

Accepted: 2019/11/24

Publishing: 2019/03/01

#### Corresponding Address

Thâmara Silva Bezerra de Souza  
Avenida Brasil, 19  
Bairro Universitário  
CEP: 55016360— Caruaru (PE), Brazil