


Find answers to textbook questions

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How to get answers to textbook questions.

Q: What causes endometriosis? A: The most widely accepted cause of the disease is retrograde menstruation. This means that the tissues of the uterine lining, called endometrial tissue, flows backwards through a woman's fallopian tubes while she is menstruating. The tissue gets trapped and cannot leave the body as the rest of the endometrial lining does during menstruation. However, no matter where it is located in the body, the endometrial tissue still responds to hormonal stimulation every month. Endometriosis implants may become inflamed, bleeding and develop into scar tissue. When implants are attached to organs in the pelvic cavities and abdominal cavities severe pain, infertility and other problems can cause. There are other theories about what causes endometriosis, including a poor immune system response, hormonal imbalances or environmental causes. Experts have also found strong evidence to suggest a genetic link to the disease.Q: What does endometriosis prove? A: Pain in the pelvic region is the most common symptom of the disease. Although some women who have endometriosis do not experience symptoms. The degree of pain varies from very gentle pain to severe pain which can make it impossible for a woman to go about her normal life. Some women describe pain as sharp and burning. It can last all month, but is usually worse during menstruation, with deep penetration during sex, or with bowel movements. Some women don't report any pain. Other symptoms may include:abnormal menstrual bleedingevere menstrual cramps repellent pain distinct from menstrual crampsibackachepain during or after sexual penetrationpainful bowel movementspain with extensive pelvic examinationQ: How can I be sure to be correctly diagnosed if pain associated with the disease can often be confused with other medical problems? A: If laparoscopy is not performed, sometimes your doctor will prescribe hormonal treatments taking endometriosis exists. If there is a response and a diminished pain, there is a hypothesis that endometriosis was actually the cause of the pain. However, endometriosis cannot be definitively diagnosed without laparoscopy and biopsy. The American College of Obstetricians and Gynecologists (ACOG) recommends a peritoneal (tissue) biopsy to confirm the presence of endometrial lesions. Q: Can I get pregnant if I have endometriosis? A: Yes, you can. Almost all women who have endometriosis are fertile, and there are many women who have the disease and continue to have children. Endometriosis, unless it blocks the fallopian tubes, is not generally considered an absolute barrier to contraception.Q: Is there any way to prevent endometriosis?A: Unfortunately, the answer is probably not. Researchers can't say with certainty what causes some to get the disease while other women do not. Only 10 percent to 15 percent of all women in their reproductive years suffer from endometriosis. Q: What options are available for treatmentThe most common medical therapies for endometriosis are hormonal contraceptives and other hormonal regimens, such as GnRH agonists (hormonal drug-releasing gonadotropin), which control hormonal stimulation of endometrial tissue. Danazol, a synthetic androgen, is also used, but it can cause some unwanted side effects, including weight gain, hysteria (hair growth) and low voice. Surgical treatments range from removing only the endometrial implants through laparoscopy to removing the uterus and ovaries.Q: How do I know which treatment option is best for my endometriosis case? A: It's hard to know which course of treatment is best for you, especially because no comparative studies have been conducted to determine which approach is best. There are pros and cons for all treatment options. Up to 90% of women with the disease will be helped by medical therapies. Oral contraceptives can be used indefinitely to manage symptoms. The goal of surgery is to remove endometriosis, restore the normal anatomical relationship of the tissue, and remove any scar tissue caused by the condition. Most women choose laparoscopy if they decide to go with surgery. Many women try to avoid a hysterectomy if they can, as it is a radical procedure that will leave them infertile, with no guarantee that their endometriosis will be gone forever. Because of the risks associated with surgery, the usual course of treatment is to proceed from the least invasive or risky to the most invasive treatment. This means that medical treatment is more often tried before. If you do not experience any success after several trials of different kinds of drugs, then laparoscopy can be recommended with hysterectomy as a last resort for most women depending on their age and their desire to preserve fertility. Correct Answer: Correct Answer: Correct Answer: Correct Answer: Correct Answer: Correct Answer: Tip: With well beyond new or used options, students have several choices to find the best book for their dollar. With far beyond new or used options, students have several choices to find the best book for their dollar. It's not a question: textbooks are not cheap. But now students face more options when it comes to getting books for the lowest price: buy, rent, or e-books? The rate at which textbook prices increase is 3 times that of inflation, a 2013 government accounting office found, and a College Board estimate on books and course supplies for the 2013-2014 academic year totaled \$1,200. Students have options, however, that can reduce the cost of their books significantly. Textbook rentals can offer more options But they are available with different caveats. 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