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# Supporting endometriosis:

## A whole-person care approach

## What is whole-person endometriosis care?

Endometriosis is a complex, inflammatory disease in which tissue similar to the uterine lining grows outside the uterus, often leading to chronic pain, digestive symptoms, and fertility issues. Because it affects more than just the reproductive system, long-term relief often requires more than hormone suppression or surgery. A whole-person approach recognizes the unique ways endometriosis shows up in each individual and considers the roles of immune health, gut function, hormone regulation, stress, and environmental exposures. It combines conventional tools like imaging and lab work with personalized lifestyle and nutrition strategies to reduce inflammation, support detoxification, and promote overall balance in the body.

Step 1

## Personalized assessment

The most reliable way to diagnose endometriosis is through laparoscopic surgery, a minimally invasive procedure that allows doctors to look directly inside the abdomen and confirm the condition by analyzing tissue samples. However, because this approach is invasive and can delay treatment, there has been a growing shift toward diagnosing based on symptoms, physical exam findings, and non-invasive imaging.

Transvaginal ultrasound (TVUS) is usually the first imaging test to evaluate suspected endometriosis. Other imaging methods may be considered if there is concern about more severe forms of the disease, especially when it may affect organs like the intestines or urinary tract. These include magnetic resonance imaging (MRI), transrectal ultrasound (TRUS), multidetector CT scans (MDCT), or nuclear medicine scans (scintigraphy). While these tests can provide more detailed information, they are often more expensive and may not be readily available in all healthcare settings.

In addition to imaging, laboratory testing can provide valuable insights into what may be contributing to the symptoms of endometriosis. Providers may look at three key areas: **Metabolism, inflammation, and immune function.**

- **Metabolic dysfunction:** Blood sugar, insulin resistance markers, cholesterol panel
- **Inflammation:** C-reactive protein (CRP), erythrocyte sedimentation rate (ESR), pro-inflammatory proteins, oxidative stress markers
- **Immune dysregulation:** Complete blood count (CBC) with differential, screening for autoimmunity, vitamin D, and analysis of gut microorganisms (microbiome) via stool testing

Step 2

# Lifestyle foundations for endometriosis

## Nutrition

A healthy, anti-inflammatory diet may help reduce the severity of endometriosis by limiting lesion growth and recurrence, decreasing pain perception, and improving quality of life and fertility outcomes in individuals with endometriosis.

**Foods to eat:**

- Colorful fruits (especially citrus) and vegetables
- Fatty fish 2–3 times weekly: Salmon, sardines, mackerel, herring, and anchovies
- Fiber (25–35 g daily): Fruits, vegetables, whole grains, beans, nuts, and seeds
- Fermented foods: Yogurt (with live cultures), kefir, sauerkraut, kimchi, miso, and kombucha

**Essential nutrients for endometriosis:**

- Antioxidants: Blueberries, dark chocolate, green tea, red grapes, and spinach
- Omega-3 fatty acids: Fatty fish, walnuts, flaxseeds, chia seeds, and hemp seeds
- Vitamin C: Kiwi, bell peppers, strawberries, citrus fruits, and broccoli
- Vitamin D: Salmon, cod liver oil, egg yolks, and ultraviolet (UV)-exposed mushrooms
- Vitamin E: Sunflower seeds, almonds, avocados, spinach, and hazelnuts

**Foods/ingredients to avoid:**

- Processed foods high in trans fats: Packaged baked goods and snack foods, fried foods, and margarine
- Added sugars
- Excessive red meat
- Refined carbohydrates: White bread, rice, and pasta; pastries; breakfast cereals

## The Mediterranean diet

The Mediterranean is a good example of an anti-inflammatory diet that encompasses the principles outlined above. Evidence shows that women who eat a Mediterranean diet may have lower levels of reactive oxygen species (molecules that cause tissue damage), inflammation, and chronic pain symptoms.


The Mediterranean diet food pyramid

## Other specialized diets

Other therapeutic diets may offer symptom relief, particularly for those who experience overlapping digestive discomfort (e.g., bloating, abdominal pain, changes in bowel movements, nausea).

- **Low-FODMAP (Fermentable Oligosaccharides, Disaccharides, Monosaccharides, and Polyols) diet:** Eliminates fermentable carbohydrates that can cause gas, bloating, and pain
- **Gluten-free diet:** Eliminates all sources of gluten, a protein found in wheat, barley, and rye

## FODMAP subgroups and sources

The table below outlines dietary FODMAPs, their effects, and common dietary sources in which they are found.

| Component | Effects | Common dietary sources |
|---|---|---|
| **Oligosaccharides** (e.g., fructans, galactooligosaccharides (GOS)) | No human enzymes for digestion<br>Highly fermentable; produce gas, bloating, and abdominal pain | Artichokes<br>Allium vegetables (e.g., garlic, leeks, onions)<br>Certain fruits (e.g., ripe bananas, dates, dried apricots, peaches)<br>Certain grains (e.g., barley, rye, wheat)<br>Inulin (found in some dietary supplements)<br>Legumes (e.g., beans, lentils, soy products)<br>Nuts |
| **Disaccharides** (e.g., lactose) | Malabsorption occurs if transport proteins are altered or if the individual is enzyme-deficient<br>Unabsorbed components are fermented in the large intestine; may result in gas and bloating | Dairy (e.g., cheese, ice cream, milk, yogurt) |
| **Monosaccharides** (e.g., fructose) | Draw water into the bowel contents<br>Leads to pain, bloating, and distension of the small intestine<br>May result in diarrhea | Certain fruits (e.g., apples, cherries, figs, mangoes, pears, watermelon)<br>Certain vegetables (e.g., asparagus, beets, sugar snap peas)<br>High-fructose corn syrup<br>Honey |
| **Polyols** (e.g., erythritol, maltitol, mannitol, sorbitol, xylitol) | Likely to draw water into the bowel<br>Leads to pain, bloating, and distension of the small intestine<br>May result in diarrhea | Artificial sweeteners (e.g., chewing gum, mints)<br>Certain fruits (e.g., apples, blackberries, pears, stone fruit)<br>Certain vegetables (e.g., cauliflower, mushrooms, snow peas) |

# Gluten-free alternative foods

| | Foods to avoid* | Gluten-free alternatives |
|---|---|---|
| **Fruits** | Fruit juices and smoothies that contain wheatgrass or barley grass | Plain fruit (fresh or frozen)<br>Plain fruit juices |
| **Vegetables** | Battered, fried vegetables<br>Fried potatoes cooked in shared oil<br>Pre-seasoned vegetables<br>Vegetables in sauces | Plain vegetables (fresh or frozen)<br>Plain vegetable juices |
| **Dairy and dairy alternatives** | Malted milk<br>Oat milk, unless gluten-free<br>Seasoned dips, spreads, and cheeses<br>Seasoned or flavored egg products | All plain dairy products (e.g., cheese, milk, ice cream, yogurt)<br>Most non-dairy milk substitutes (e.g., coconut, rice, soy)<br>Dairy-free cheese, ice cream, and yogurt<br>Plain whole eggs, egg whites, or egg products |
| **Grains, pseudograins, and starches** | Breads, cereals, pastas, and pastries made with barley, rye, or wheat<br>Chips or crackers made with wheat or malt vinegar<br>Flour tortillas<br>Matzo<br>Pizza dough<br>Seasoned rice mixes<br>Tabbouleh and couscous | Gluten-free breads, cereals, pastas, and pastries<br>Gluten-free flours and grains<br>Gluten-free tortillas<br>Gluten-free pizza dough<br>Corn and corn products (e.g., popcorn, corn chips, corn tortillas)<br>Rice and rice products (e.g., plain rice, rice crackers)<br>Quinoa |
| **Meats and meat alternatives** | Meat, poultry, fish, and seafood breaded in gluten-containing ingredients<br>Most processed meats, sausages, and spreads<br>Plant-based meat substitutes<br>Pre-seasoned meat products<br>Frozen poultry injected with hydrolyzed wheat protein<br>Canned fish or seafood containing hydrolyzed wheat protein<br>Canned beans in sauce | Plain or gluten-free breaded meat, poultry, fish, and seafood<br>Plain beans and legumes<br>Plain tofu |

*Unless labeled gluten-free

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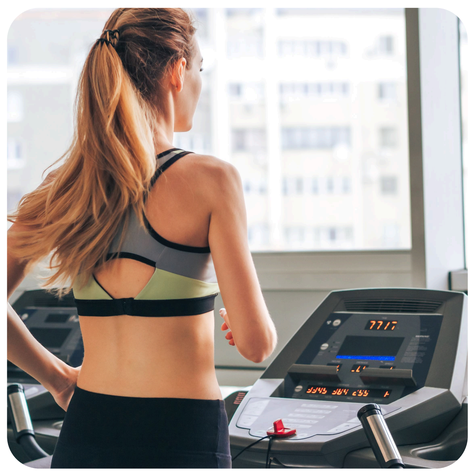
|---|---|---|
| **Nuts and seeds** | Seasoned or dry roasted nuts and seeds | Plain or salted nuts, nut butters, and seeds |
| **Condiments and other** | Brewers yeast<br>Dressings, sauces, and gravies made with wheat ingredients (e.g., barbeque sauce, miso, soy sauce)<br>Licorice candy<br>Malt vinegar<br>Tempura | Gluten-free chocolates and candies<br>Gluten-free dressings, sauces, and gravies<br>Oils<br>Vinegars (e.g., apple cider, balsamic)<br>Yeast (e.g., active dry, baker’s) |

*Unless labeled gluten-free

## Movement/exercise

Regular exercise, particularly aerobic exercise, can reduce oxidative stress and inflammation, leading to improvements in pain intensity, pelvic floor dysfunction, mental health, bone density, and overall quality of life.



Aim to exercise at least three times a week for a total of 150 minutes of moderate-intensity aerobic physical activity. Modify any exercises to your needs, considering any physical limitations, pain levels, and energy.

Establish care with a physical therapist 4–6 weeks leading up to excision surgery for endometriosis to focus on prehabilitation exercises, which support a smoother recovery.

Syncing exercise to the menstrual cycle may help you get the most out of your workouts. Gentle movement may be best during menstruation and the luteal phase (the second half of the menstrual cycle, starting after ovulation and lasting until the start of the next period), More intense workouts may feel easier during the follicular (the first half of the menstrual cycle, beginning on the first day of the period and lasting until ovulation) and ovulatory phases when energy is typically higher.

## Aerobic exercise

| | Moderate-intensity | Vigorous-intensity |
|---|---|---|
| **Target heart rate** | 40–60% of maximum heart rate* | 60–85% of maximum heart rate* |
| **Perceived effort (on a scale of 1–10)** | Level 5-8 | Level 8-10 |
| **Talking ability** | Can talk but can't sing | Can't say more than a few words without pausing for a breath |
| **Examples** | • Biking<br>• Boxing<br>• Brisk walking<br>• Climbing stairs<br>• Dancing<br>• Doubles tennis<br>• Gardening<br>• Jumping on a trampoline<br>• Hiking<br>• Roller skating<br>• Water aerobics | • Biking 10+ mph (16+ kph)<br>• Endurance sports (e.g., basketball, soccer)<br>• Jogging/running<br>• Jumping rope<br>• Rock climbing<br>• Rowing<br>• Swimming laps<br>• Yard work (e.g., raking, shoveling) |

*Age-related maximum heart rate can be calculated by subtracting your current age from 220. This calculation provides your maximum heart rate in beats per minute.

## Sleep

Poor sleep can worsen inflammation, increase pain sensitivity, and negatively impact hormone balance. Prioritizing good sleep habits can support efforts to manage endometriosis symptoms.

- Go to bed and wake up at the same time each day, even on weekends.
- Create a calming bedtime routine with activities like taking a bath, reading, gentle stretching, or deep breathing.
- Limit screen time at least one hour before bed to reduce blue light exposure, which can interfere with the production of melatonin (the "sleep hormone").
- Keep your bedroom cool, dark, and quiet to support restorative sleep.
- Avoid caffeine, alcohol, and heavy meals in the evening and close to bedtime, as these can disrupt sleep cycles.
- If pain is interfering with sleep, talk to your doctor about nighttime pain management options, such as heat therapy or medication.

## Stress/relationships

Endometriosis is more than a gynecological condition—it can profoundly affect emotional and social well-being. Many individuals experience chronic pain, infertility, and unpredictable symptoms that contribute to heightened stress, anxiety, and depression. This can interfere with relationships, daily activities, and overall quality of life.

- Talk to your doctor if you're experiencing symptoms of depression or anxiety, including sadness, irritability, or loss of interest in activities.
- Consider establishing care with a licensed mental health professional to build resilience and learn effective coping strategies for managing stress.
- Practice daily mindfulness and relaxation techniques, such as guided meditation, breathing exercises, or yoga, to help calm the nervous system.
- Set aside time for activities that bring a sense of joy, connection, or purpose.
- Join a support group to connect with others who understand living with endometriosis to reduce feelings of isolation and validate your experience.

## Environment

Endocrine-disrupting chemicals (EDCs) are substances found in plastics, personal care products, and environmental pollutants that can interfere with hormonal balance. Research suggests the EDCs may worsen endometriosis by increasing inflammation and mimicking estrogen, which can promote the growth and spread of endometrial tissue outside the uterus.

### 5 tips for reducing EDC exposure

Buy fragrance-free personal care products.

Minimize handling of thermal paper receipts.

Buy organic produce when possible, especially items listed on the Environmental Working Group's "Dirty Dozen™," which are more likely to carry pesticide residues.

Replace plastic food containers and water bottles with glass or stainless steel.

Filter drinking water.

Step 3

# Targeted supplement support

While supplements are not a cure, they can be a helpful part of a comprehensive care plan. Your healthcare provider may recommend certain supplements as part of your treatment plan.

| | |
|---|---|
| **Anti-inflammatory** | Omega-3 fatty acids<br>Curcumin<br>Quercetin<br>Epigallocatechin-3-gallate (EGCG) |
| **Antioxidants** | Vitamin C<br>Vitamin E<br>N-acetylcysteine (NAC)<br>Zinc<br>Resveratrol<br>Alpha-lipoic acid (ALA) |
| **Immune support** | Vitamin D<br>Propolis |
| **Symptom management** | Palmitoylethanolamide (PEA) Magnesium |
| **Microbiome support** | Probiotics |

*Always consult your provider before starting new supplements, especially if pregnant, breastfeeding, or taking other medications or supplements. Supplement plans should be personalized and monitored over time.*

# Final thoughts

Living with endometriosis can be challenging, but you have options. Whole-person care honors the complexity of your experience and the wisdom of your body. Healing doesn’t happen overnight, but a life without chronic pain is possible. You can reclaim a greater sense of gynecological well-being by addressing the root causes and supporting your body through nutrition, movement, rest, and targeted therapies.

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