

Endometriosis is a common condition affecting 1 in 10 women, which can cause severe pain. It happens when cells similar to those lining the womb grow outside the womb, generally on surfaces and organs within the pelvic cavity, causing bleeding, scarring and inflammation. Occasionally, endometriosis cells can grow deeper into tissues and organs, such as the bowel, bladder and the vagina causing a painful condition called deep endometriosis.

Deep endometriosis is treated in one of two ways:

- by taking hormones which can shrink areas of existing endometriosis and prevent new areas forming by stopping the growth of abnormal cells
- by using keyhole (laparoscopic) surgery to remove areas of endometriosis

Clinical guidelines state that either hormones (medical management) or surgery can be used but are unable to recommend one over the other in the absence of research directly comparing them. As a result, doctors' decisions are often based on their personal preferences, resulting in major differences in clinical practice across the National Health Service (NHS).

We planned to complete a large UK-wide study (called DIAMOND) to compare the benefits and risks of these treatments for deep endometriosis, to provide a clear and evidence-based answer to this important question. Unfortunately, we found it very difficult to recruit women into DIAMOND. Most women did not join the study because they wanted surgery rather than medical management. Recruitment began in July 2022 and by October 2023 only 18 women had agreed to join the study. Due to the low number of recruited participants, it was decided to stop DIAMOND early. Unfortunately, this means we won't be able to gather any meaningful results to decide which treatment is best for deep endometriosis.

We hope the difficulties in DIAMOND help inform future studies of treatments for deep endometriosis.