

## Endometriosis, Tampons and Orgasm during Menstruation: Science, Press and Patient Organizations

This issue of *Gynecologic and Obstetric Investigation* is historical in the sense that it is the first time for this journal to receive and publish Letters to the Editor [1, 2], the reply of the authors [3] and our reaction.

The paper entitled ‘Sexual activity, orgasm and tampon use are associated with a decreased risk for endometriosis’, by Meaddough and colleagues from Yale University, was published after the normal peer review process in the June 2002 issue of this journal [4]. This paper tested the hypothesis that there would be a positive association between the development of endometriosis and sexual activity/tampon use during menses, but actually found a negative association: women with endometriosis were less likely to engage in sexual activity or to use tampons than women without endometriosis. The authors never alluded to a cause-effect relationship and acknowledged a major bias in this study (the lack of laparoscopic/histological evidence of endometriosis) that was inherent to the study design (questionnaire). Unfortunately, the lay press selected the most ‘sexy’ aspects of the study and went overboard in claiming that new scientific evidence had shown that ‘having orgasms during menstruation was protective against the development of endometriosis’. Of course, this story in the media caused substantial anger in many women with endometriosis and prompted reaction from the Endometriosis Association and from the Endometriosis Research Center, not only in the lay press, but also as Letters to the Editor in this issue of *Gynecologic and Obstetric Investigation*.

Both the Endometriosis Association and the Endometriosis Research Center are patient advocacy organizations supporting the need for more patient awareness, information and research regarding endometriosis. Over the last 20 years, the Endometriosis Association has become a global organization that not only informs patients about the causes, symptoms, diagnosis and management of endometriosis, but also plays a very active role in raising and distributing funds to support endometriosis research. In that capacity, the Endometriosis Association has also started to select preferred areas of endometriosis research, such as the link between endometriosis and the environment, adolescent endometriosis, etc. Over the last 5 years, the Endometriosis Association has become recognized as an advisor/partner in the development of post-graduate training programs for gynecologists at major meetings such as the Annual Meetings of ESHRE (European Society of Human Reproduction and Embryology), ASRM (American Society of Reproductive Medicine) and the Bi-Annual World Congress on Endometriosis. Such development brings patient issues to the front of the biomedical agenda and should be appreciated by physicians, scientists and patients. In that context, it is logical that representatives of the Endometriosis Association follow new scientific developments with great interest and that they react when they feel that this is necessary, as they have done in their letter [1]. However, it is important to discern press coverage of a published paper and the actual scientific content of this paper.

Peer review is an essential but incomplete step to guarantee scientific quality. However, rather than abandon review, journals should work to strengthen it, in particular regarding statistical and methodological review [5]. *Gynecologic and Obstetric Investigation* has recognized this need and we are proud to have Bridget Zimmerman on board as Associate Editor for complex statistics, methodology and study design. After the publication of peer-reviewed papers, Letters to the Editor are an essential part of the post publication peer review process. It has been stated by the World Association of Medical Editors that 'Editors should promote self-correction in science and participate in efforts to improve the practice of scientific investigation by publishing corrections, retractions, and letters critical of articles published in their own journal' [6]. Furthermore, editors should give special attention to letters making criticisms of methodology, and these letters should not be rejected due to lack of space or time limitations on correspondence.

Therefore, we thank the Endometriosis Association and the Endometriosis Research Center for their Letters to the Editor, and Dr. Harvey Kliman and Dr. David Olive for their clear and thoughtful response. Authors and editors have the same goals: the advancement of scientific understanding and improvement in the treatment and prevention of disease. As Editors-in-Chief, we are committed to continuously improve the quality of both the prepublication and the postpublication peer review process in *Gynecologic and Obstetric Investigation*. Therefore, from now on, Letters to the Editor can be formally submitted to *Gynecologic and Obstetric Investigation*, as specified in the Guidelines for Authors in this issue.

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## References

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- 2 Guidone HC, Marvel ME: Concerning the article by Meaddough et al: Sexual activity, orgasm and tampon use are associated with a decreased risk for endometriosis (letter to the editor). *Gynecol Obstet Invest* 2002;54:64–65. DOI: 10.1159/000068356.
- 3 Kliman HJ, Olive DL: Authors' response to the Letters to the Editors concerning the article by Meaddough et al: Sexual activity, orgasm and tampon use are associated with a decreased risk for endometriosis. *Gynecol Obstet Invest* 2002;54:65–66. DOI: 10.1159/000068357.
- 4 Meaddough EL, Olive DL, Gallup P, Perlin M, Kliman HJ: Sexual activity, orgasm and tampon use are associated with a decreased risk for endometriosis. *Gynecol Obstet Invest* 2002;53:163–169.
- 5 Altman DG: Poor-quality medical research. What can journals do? *JAMA* 2002;287:2765–2767.
- 6 Report of the World Association of Medical Editors (WAME): An agenda for the future. Available at: [http://www.wame.org/bellagioreport\\_1.htm](http://www.wame.org/bellagioreport_1.htm).