

# Book review

## *The Australian guide to living well with endometriosis*

**Author: Maree Davenport**

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In Australia, one in seven women is diagnosed with endometriosis by the age of 50 years, and the impact of endometriosis is estimated to cost the Australian economy \$9.7 billion every year.<sup>1</sup> In

*The Australian guide to living well with endometriosis*, Maree Davenport offers a comprehensive manual on all aspects of life with endometriosis. In 18 chapters, she discusses diagnostic pathways; what to expect in medical consultations; the latest in current and future medical treatments; as well as ways to manage endometriosis in the context of school, work and overarching government policies.

Davenport, a former Member of Parliament in Victoria, has advocated for people living with endometriosis through roles such as the Chair of the Federal Department of Health's Endometriosis Expert Advisory Group and was on the organising committee for the World Congress on Endometriosis (Sydney, May 2025). Her connection to endometriosis is also personal: her daughter developed symptoms of endometriosis aged 8 years.

Though written as a practical handbook for people living with endometriosis, Davenport also provides insights for medical practitioners. Davenport integrates guidelines, interviews with medical specialists

and the personal experiences of people living with endometriosis to clarify several common misunderstandings around endometriosis. She notes that endometriosis can affect very young people, endometriosis is not cured by either pregnancy or hysterectomy, and up to 5% of people with endometriosis continue to experience symptoms after menopause.<sup>2</sup> Davenport also notes that, while there are two commonly used but separate ways to classify endometriosis (the revised American Society of Reproductive Medicine staging system<sup>3</sup> and the Endometriosis Foundation of America EndoFound Classification<sup>4</sup>), neither classification system accounts for symptom severity or prognosis.

Furthermore, *The Australian guide to living well with endometriosis* is strongly shaped by Davenport's background in policy and advocacy. She reflects on systemic weaknesses that extend beyond clinical care and contextualises endometriosis within broader structural inequities. Through this, Davenport argues that endometriosis is not only a medical condition but also a political issue. Davenport highlights the role of medical misogyny: that menstrual symptoms are under-researched and consequently undervalued, leading to delayed diagnosis and suboptimal treatment. These issues are compounded by wider gender inequity, including the gender pay gap, which further restricts access to care. Davenport takes a moment to note that even medical practitioners are not exempt, and she draws attention to the pay disparity affecting female general practitioners.

So, what should be done to address these issues? Davenport identifies the important role medical providers have in supporting people in their endometriosis journey. Davenport recognises the positive impact that medical practitioners can provide through active listening, openness to learning about a patient's experience, and investing

time and care in individualising treatment. However, she notes that this care cannot be provided without broader changes in policy. Davenport emphasises the need for education in schools, ongoing upskilling of medical practitioners to support multidisciplinary and empathetic approaches, funding of further research, and improved collaboration with global initiatives.

*The Australian guide to living well with endometriosis* serves as both a practical handbook to empower those living with endometriosis as well as a reflection on the systemic challenges surrounding its care. Davenport combines personal experience, clinical insight and policy expertise to highlight the gaps in diagnosis, treatment and support, while offering directions to address these inequities and improve the wellbeing of those living with endometriosis.

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References are available online only.

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