Non-white Race is Associated with Increased Odds of Late-Stage Presentation in Patients with Pathology Confirmed Endometriosis

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Endometriosis Background

- Average 4 to 11 year delay in diagnosis.^{1,2}
- Affects from 10-15% of all women of reproductive age, and 35-50% of women with pelvic pain and/or infertility.⁸
- Interestingly, previous literature has shown that the likelihood of diagnosis appears to differ among women from different racial/ethnic backgrounds.³

Our **objective** was to analyze the relationship between white or non-white race/ethnicity and severity of endometriosis at the time of diagnosis.

Methods

- 789 patients underwent minimally invasive surgery at a single institution by a single surgeon from 2011-2022.
- Included patients (n=539) were found to have pathology confirmed endometriosis with documented staging.⁵
 - Non-white, n=151 (28%)
 - White, n=388 (72%)
- Demographics and evaluation/treatment data were collected.
- Stage 1 & 2 endometriosis was defined as "early-stage" while Stage 3 & 4 was defined as "late-stage."

Results & Conclusion

In this 10-year, single center study, non-white race conferred over two times increased odds of a late-stage (Stage 3 or Stage 4) endometriosis diagnosis when compared to white patients.

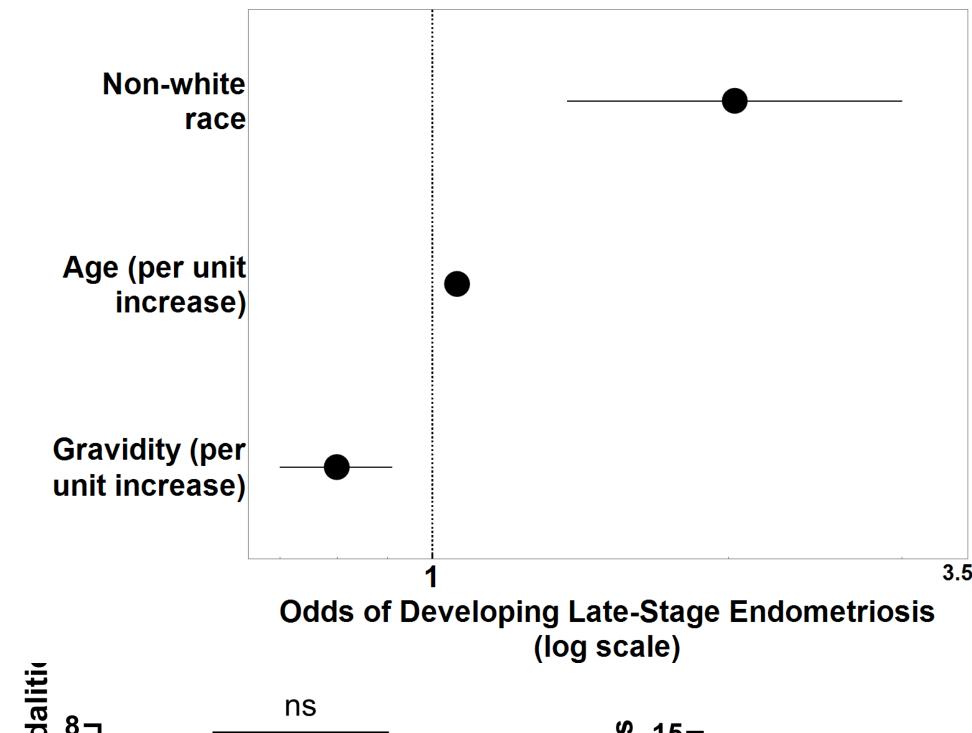


Figure 1. Non-white race is associated with significantly greater odds of having stage 3 or 4 endometriosis at the time of diagnosis.

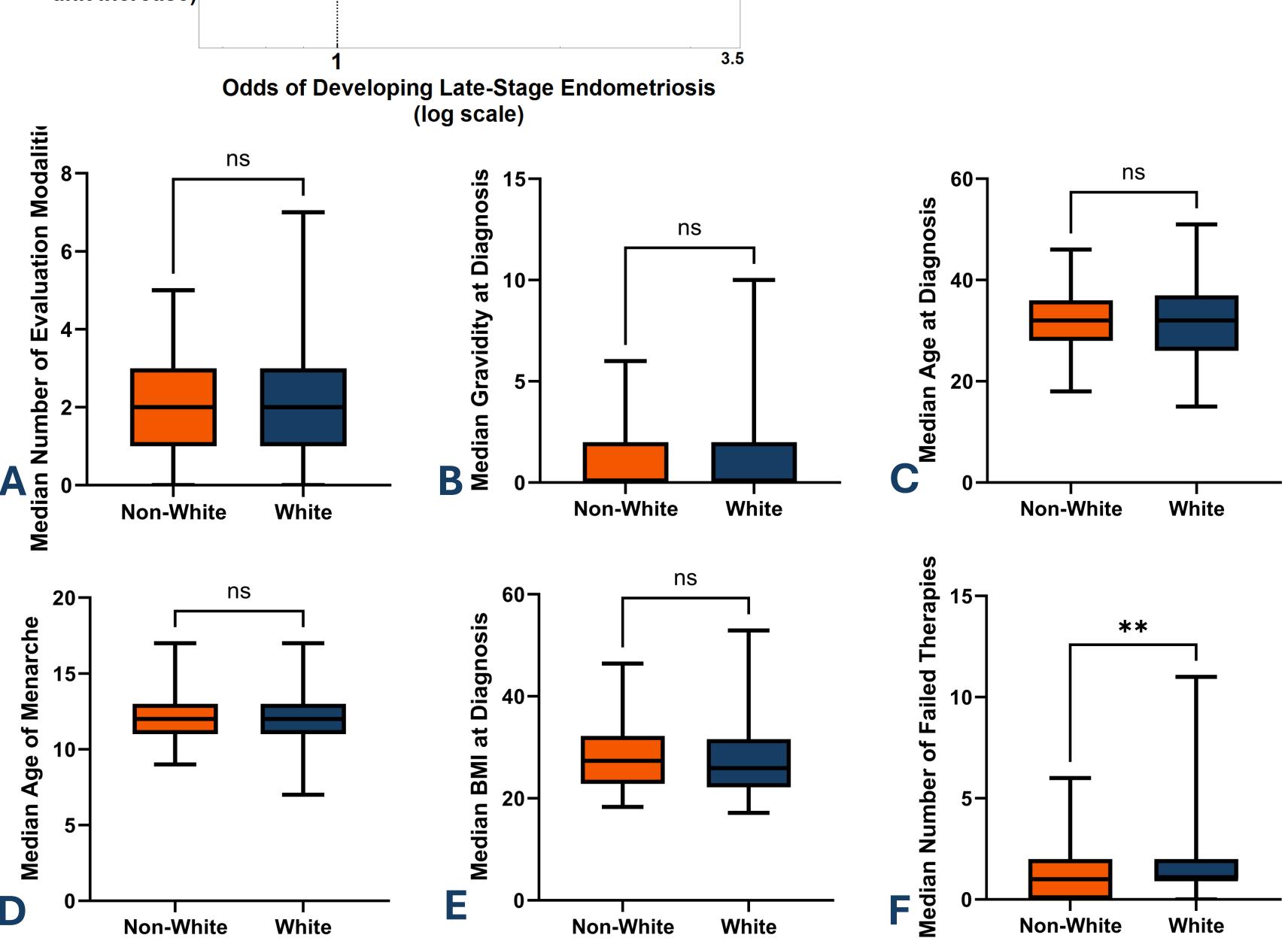


Figure 2. No significant difference existed between white and non-white race with regard to number of evaluation modalities (A), gravidity (B), age (C), age of menarche (D), or BMI (E). Number of failed therapies (F) showed a statistically significant difference between groups, but likely minimal clinical significance.

Table 1. Odds of developing late-stage endometriosis. Statistically significant results are bolded.

| Variable | Odds ratio | 95% Confidence interval | p-value |
|-------------------------------|---------------|-------------------------|---------|
| Non-white race | 2.03 | 1.37-3.00 | <0.001 |
| Age (per unit increase) | 1.06 | 1.03-1.09 | <0.001 |
| Gravidity (per unit increase) | 0.80 | 0.70-0.91 | <0.001 |

- Non-white patients are being diagnosed at a more advanced stage of their disease and thus much later in the disease timeline.
- Non-white patients may face additional challenges in accessing timely diagnoses and effective treatment modalities.
- Increased provider awareness of the factors that are most predictive of endometriosis and earlier treatment and intervention can help to reduce racial disparities.

References

- 1. Davenport S, Smith D, Green DJ. Barriers to a Timely Diagnosis of Endometriosis: A Qualitative Systematic Review. *Obstet Gynecol*. 2023;142(3):571. doi:10.1097/AOG.000000000005255
- 2. Agarwal SK, Chapron C, Giudice LC, et al. Clinical diagnosis of endometriosis: a call to action. *Am J Obstet Gynecol*. 2019;220(4):354.e1-354.e12. doi:10.1016/j.ajog.2018.12.039
- 3. Bougie O, Yap MI, Sikora L, Flaxman T, Singh S. Influence of race/ethnicity on prevalence and presentation of endometriosis: a systematic review and meta-analysis. *R Coll Obstet Gynaecol*. Published online 2019.
 4. Moradi M, Parker M, Sneddon A, Lopez V, Ellwood D. Impact of endometriosis on women's lives: a
- qualitative study. *BMC Womens Health*. 2014;14(1):123. doi:10.1186/1472-6874-14-123
- American Society for Reproductive Medicine. Revised American Society for Reproductive Medicine classification of endometriosis: 1996. Fertil Steril. 1997;67(5):817-821. doi:10.1016/S0015-0282(97)81391-X
 Gordts S, Koninckx P, Brosens I. Pathogenesis of deep endometriosis. Fertil Steril. 2017;108(6):872-885.e1. doi:10.1016/j.fertnstert.2017.08.036
- 7.. Moawad NS, Guido R, Ramanathan R, Mansuria S, Lee T. Comparison of Laparoscopic Anterior Discoid Resection and Laparoscopic Low Anterior Resection of Deep Infiltrating Rectosigmoid Endometriosis. *JSLS*. 2011;15(3):331-338. doi:10.4293/108680811X13125733356431
- 8. Smolarz B, Szyłło K, Romanowicz H. Endometriosis: Epidemiology, Classification, Pathogenesis, Treatment and Genetics (Review of Literature). International Journal of Molecular Sciences. 2021; 22(19):10554. https://doi.org/10.3390/ijms221910554