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Health E-Stat 121: Endometriosis, Polycystic Ovary Syndrome, and Uterine Fibroids in Women Ages 20–49: United States, 2022–2023

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Endometriosis, polycystic ovary syndrome (PCOS), and uterine fibroids are among the most common gynecological conditions (1–3). Endometriosis occurs when tissue similar to the uterine lining develops outside the uterus (1). PCOS, also known as polyendocrine metabolic ovary syndrome or PMOS, is a condition related to a hormonal imbalance where cysts may develop on the ovaries (2). Uterine fibroids are noncancerous growths within or on the wall of the uterus (3). All three conditions may cause pain, infertility, and other symptoms that can negatively impact women's health and quality of life (1–3). Using data from the 2022–2023 National Survey of Family Growth (NSFG), this report provides nationally representative estimates of endometriosis, PCOS, and uterine fibroids diagnoses among women ages 20–49 by selected sociodemographic characteristics. It also shows current fertility problems—defined as having either infertility or impaired fecundity (physical ability to have children) (4)—and ever use of fertility services (5) for women diagnosed and not diagnosed with each condition.

Among women ages 20–49 in 2022–2023, 6.2% were ever diagnosed with endometriosis, 8.7% with PCOS, and 7.8% with uterine fibroids. Endometriosis diagnosis was highest among White non-Hispanic women (8.1%) compared with other race and Hispanic-origin groups shown (Table). Endometriosis diagnosis also was higher among those with the highest family income (7.1%) compared with the lowest (4.4%). PCOS diagnosis was lowest among Black non-Hispanic women (4.4%) compared with other race and Hispanic-origin groups shown. Uterine fibroids diagnosis was highest among Black non-Hispanic women (12.5%) compared with other race and Hispanic-origin groups shown. Additionally, 8.7% of women with any college attendance had uterine fibroids compared with 5.5% with a high school diploma or less. Uterine fibroids diagnosis was also higher among women with private health insurance (8.8%) compared with those who were uninsured (5.2%).

A higher percentage of women diagnosed with endometriosis had current fertility problems (33.0%) compared with women not diagnosed with endometriosis (18.6%). Similar results were observed for women with and without a PCOS diagnosis (45.2% compared with 17.1%) and for women with and without a uterine fibroids diagnosis (25.4% compared with 19.0%) (Figure 1).

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A higher percentage of women diagnosed with endometriosis had ever used fertility services (30.7%) compared with women not diagnosed with endometriosis (12.7%). Similar results were observed for women with and without a PCOS diagnosis (34.5% compared with 11.7%) and for women with and without a uterine fibroids diagnosis (31.4% compared with 12.3%) (Figure 2).

Data source and methods

This report is based on data from 4,856 female respondents ages 20–49 in the 2022–2023 NSFG who were asked if they were ever diagnosed with endometriosis, PCOS, or uterine fibroids. More information on the measures used in this report, including current fertility problems and ever use of fertility services, can be found in other NSFG reports (4,5). Details about survey content, methodology, and funding can be found in documentation on the NSFG webpage (6). All estimates in this report are representative of the U.S. household population of women ages 20–49 in 2022. Statistics were produced using SAS-callable SUDAAN software version 11.0.3 (7) to account for the complex sample design of NSFG. Differences between percentages were evaluated using two-sided significance tests at the 0.05 level. The data presented in this report are bivariate associations that may be explained by other factors not controlled for in the figures or not included in the report. All estimates presented meet National Center for Health Statistics data presentation standards for proportions (8).

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Suggested citation

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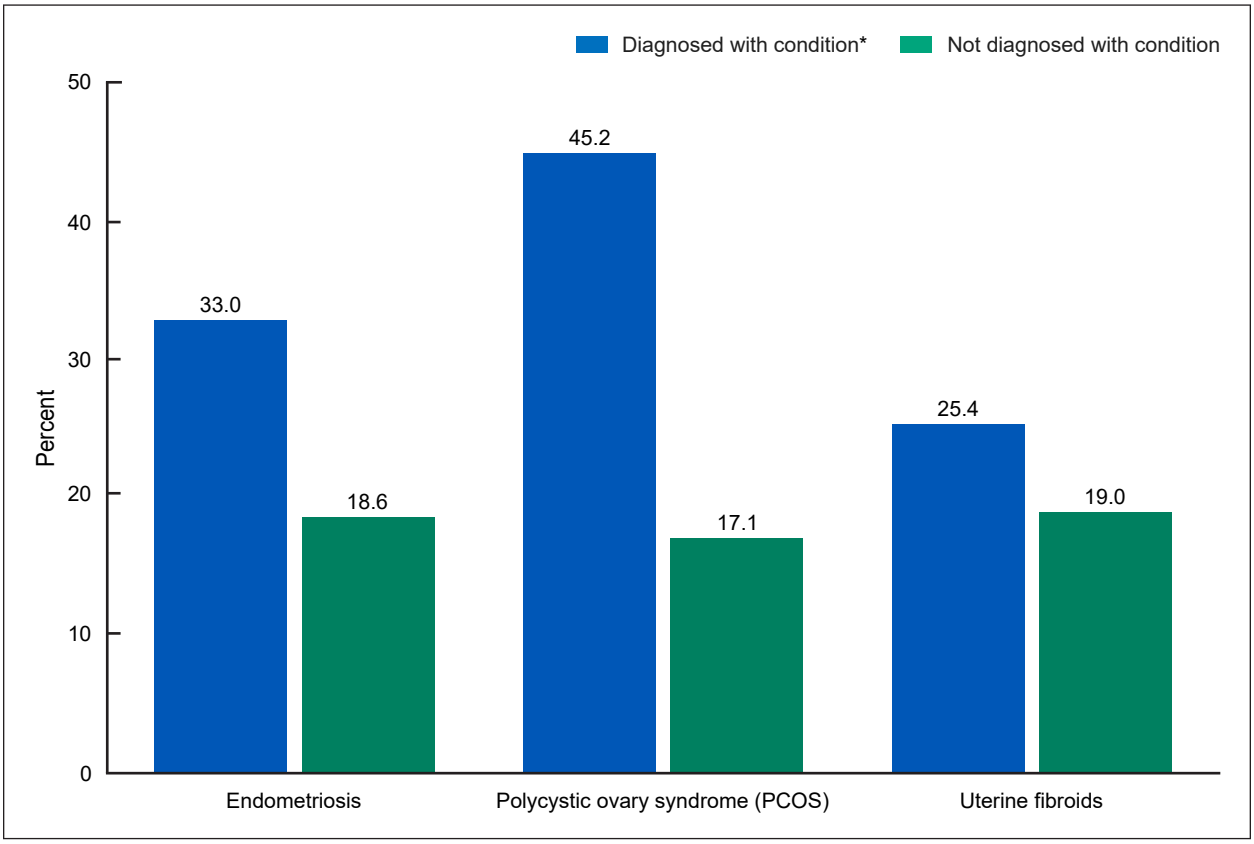
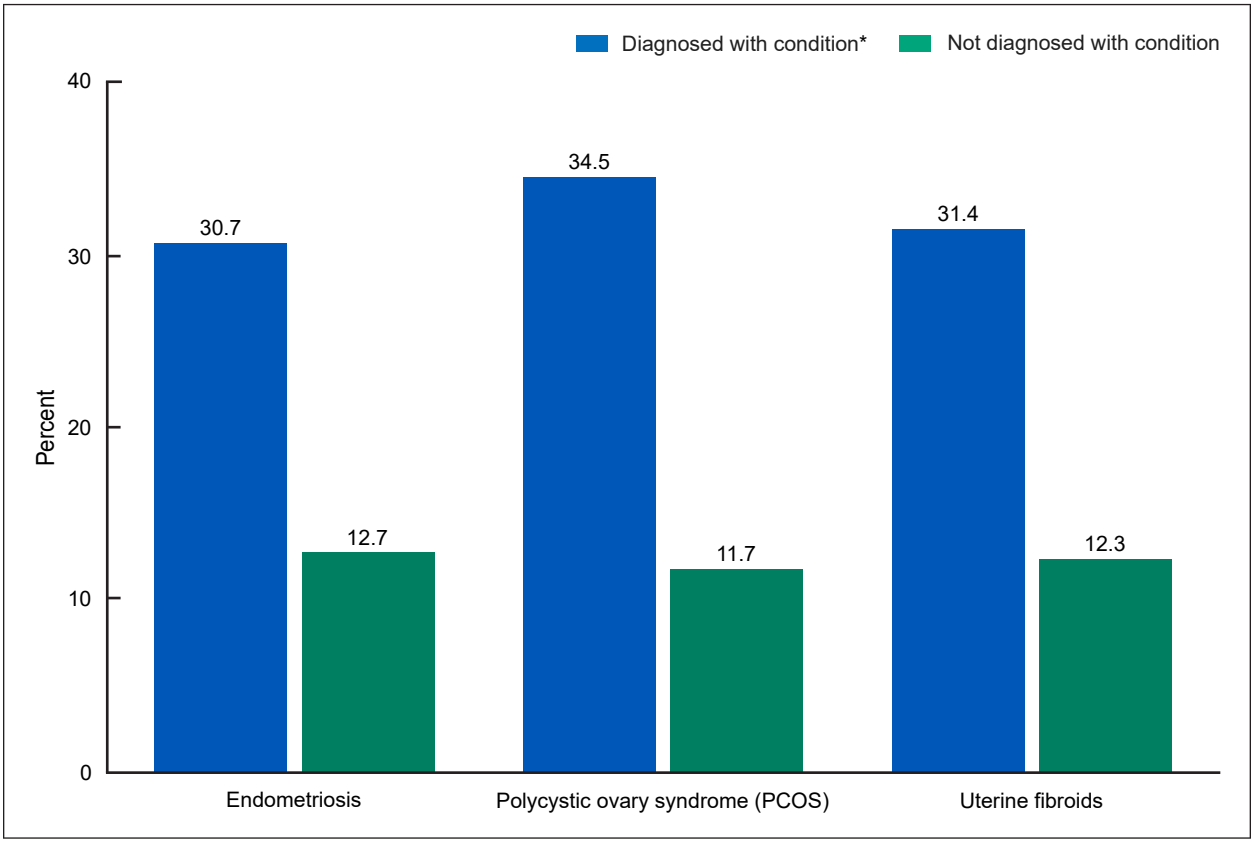
Figure 1. Percentage of women ages 20–49 with current fertility problems, by diagnosis with specified gynecological conditions: United States, 2022–2023



* Significantly different from Not diagnosed with condition ($p < 0.05$).
NOTE: Current fertility problems include either infertility or impaired fecundity.
SOURCE: National Center for Health Statistics, National Survey of Family Growth, 2022–2023.

Figure 2. Percentage of women ages 20–49 who have ever used fertility services, by diagnosis with specified gynecological conditions: United States, 2022–2023



* Significantly different from Not diagnosed with condition ($p < 0.05$).
NOTE: Fertility services include medical help to become pregnant or prevent pregnancy loss.
SOURCE: National Center for Health Statistics, National Survey of Family Growth, 2022–2023.

Table. Percentage of women ages 20–49 diagnosed with specified gynecological conditions, by selected characteristics: United States, 2022–2023

Characteristic	Endometriosis		Polycystic ovary syndrome (PCOS)		Uterine fibroids	
	Percent (95% confidence interval)	Standard error	Percent (95% confidence interval)	Standard error	Percent (95% confidence interval)	Standard error
Total	6.2 (5.2–7.2)	0.49	8.7 (7.7–9.8)	0.51	7.8 (6.8–8.9)	0.53
Age group						
20–29	3.9 (2.7–5.6)	0.69	7.6 (5.7–9.9)	1.01	1.4 (0.8–2.3)	0.36
30–39	6.3 (4.9–7.9)*	0.73	9.0 (7.3–10.9)	0.86	6.7 (5.3–8.3)*	0.71
40–49	8.4 (6.6–10.5)*	0.94	9.6 (7.9–11.6)	0.91	15.8 (13.4–18.4)*†	1.23
Number of live births						
No live births	5.9 (4.6–7.4)	0.68	9.6 (8.1–11.3)	0.79	5.1 (3.9–6.4)	0.60
One or more live births	6.4 (5.1–7.8)	0.67	8.0 (6.8–9.3)	0.60	9.8 (8.3–11.5)§	0.78
Hispanic origin and race						
Non-Hispanic:						
Asian	2.4 (1.1–4.7)	0.81	7.8 (5.2–11.1)	1.29	6.6 (3.9–10.3)	1.48
Black	3.7 (2.2–5.9)	0.87	4.4 (2.7–6.7)¶	0.94	12.5 (9.0–16.7)¶	1.84
White	8.1 (6.6–9.8)¶	0.78	9.9 (8.4–11.5)	0.76	7.1 (5.6–8.8)	0.79
Hispanic	3.7 (2.6–5.1)	0.59	8.2 (5.8–11.1)	1.28	7.4 (5.7–9.4)	0.87
Education						
High school diploma or GED or less	4.8 (3.2–6.7)	0.83	7.3 (4.9–10.5)	1.32	5.5 (4.1–7.2)	0.74
Any college attendance	6.7 (5.5–8.0)	0.60	9.2 (8.2–10.3)	0.52	8.7 (7.4–10.2)**	0.69
Family income						
Less than 150% FPL	4.4 (2.8–6.5)	0.88	8.1 (6.2–10.4)	1.01	6.4 (4.9–8.1)	0.77
150%–299% FPL	6.0 (4.0–8.6)	1.09	8.6 (6.6–10.9)	1.02	7.9 (5.7–10.7)	1.20
300% FPL or more	7.1 (5.9–8.6)††	0.66	9.1 (7.8–10.6)	0.69	8.5 (7.0–10.1)	0.76
Health insurance coverage						
Private	6.8 (5.6–8.1)	0.60	9.7 (8.5–11.1)	0.65	8.8 (7.4–10.3)§§	0.71
Public	5.6 (3.4–8.6)	1.22	7.4 (5.2–10.2)	1.19	6.7 (4.9–8.9)	0.97
Uninsured	4.8 (2.7–7.7)	1.17	7.1 (4.2–11.1)	1.63	5.2 (3.3–7.7)	1.04

* Significantly different from ages 20–29 ($p < 0.05$).
† Significantly different from ages 30–39 ($p < 0.05$).
§ Significantly different from no live births ($p < 0.05$).
¶ Significantly different from all other race and Hispanic-origin groups ($p < 0.05$).
** Significantly different from high school diploma or GED or less ($p < 0.05$).
†† Significantly different from less than 150% FPL ($p < 0.05$).
§§ Significantly different from uninsured ($p < 0.05$).

NOTES: All variables reflect the respondent's characteristics at time of survey. Total includes women of other or multiple-race groups, as well as other types of insurance such as Medicare, military insurance, and other government health care, not shown separately. People of Hispanic origin may be of any race. Family income is shown as a percentage of the federal poverty level (FPL). Public coverage includes Medicaid, Children's Health Insurance Program, and state-sponsored health plans. Uninsured includes Indian Health Service and single-service plans.

SOURCE: National Center for Health Statistics, National Survey of Family Growth, 2022–2023.