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## Strategies to Address Healthcare Disparities in Patients With Endometriosis

### Announcer:

Welcome to CME on ReachMD. This episode is part of our MinuteCE curriculum.

Prior to beginning the activity, please be sure to review the faculty and commercial support disclosure statements as well as the learning objectives.

### Dr. Bradley:

This is CME on ReachMD, and I'm Dr. Linda Bradley. And I'm joined today by Dr. Melissa Simon from her home.

Welcome, Dr. Simon.

### Dr. Simon:

It's so great to be here, Linda.

### Dr. Bradley:

Great. Let's get right to it. Melissa, what are some of the strategies that clinicians can use to overcome healthcare disparities when delivering endometriosis care?

### Dr. Simon:

Thank you so much for that question, Linda. The strategies to remove healthcare disparities are really straightforward. First and foremost, it's important to really listen to the patient and to avoid any racial or ethnicity or other biases that you might have in caring for patients. And we all have biases; it's just a matter of how to actively manage them. We definitely cannot place different population groups into generalized health-risk buckets and make any assumptions. The patient is the patient. Her story is her story, and we need to really seek to listen and really hear our patients' stories and presentations and symptoms.

And really, we have to be aware that endometriosis has so many varied presentations across different races and ethnicities, as well as where a woman is in her endometriosis journey. So because of that very wide potential for presentation, we just, as healthcare providers, really have to be cognizant of that.

We also have to really consider an endometriosis diagnosis when a patient is a reproductive-aged woman presenting with one or more of pelvic pain, menstrual or non-menstrual pain, abdominal pain, dysmenorrhea, dyspareunia, dysuria, dyschezia, depression, anxiety, sleep disorders, lower or lesser satisfaction with intimacy, with infertility, poor or personal family relationships, or decreased work productivity. We really have to be cognizant of that whole spectrum of possibilities with presentation. And in clinical practice, thus, it's important to maintain a high index of suspicion for endometriosis and refer patients for ultrasound and/or MRI imaging to assist in their diagnosis, and that should always be the top of mind.

Linda, could you kindly discuss how the social determinants of health also impact the diagnosis and management of endometriosis?

### Dr. Bradley:

Great question, Melissa. Let's move to just a brief discussion of the social determinants of health. Healthy People 2030 define social

determinants of health as follows: it's the conditions in our environments where people live, work, play, worship, and age that affect a wide range of health functioning and quality of life outcomes and risk. The *American Journal of Managed Care* in 2024 indicated that up to 80% of clinical outcomes are related to nonclinical socioeconomic barriers to optimal care, so only 20% of clinical care really affects these outcomes. But other outcomes that we must always consider when we're looking at the social determinants of health include 40% of the time it can be due to social and economic factors such as education, income, your social support, the family structure; 30% of the time to healthcare behaviors or health behaviors of our patients, substance abuse, obesity, diet, exercise; 10% is where we live, the air quality, the water quality, housing, transit; and again, only 20% due to clinical care such as access to care, quality of care, the ability to get follow-up.

In essence, biases that physicians and patients bring to engendering healthcare disparities superimpose upon even more difficult social determinants to address.

Note that substantial organizational processes are underway to address broad social determinants of health that negatively impact the delivery of quality healthcare to all patients.

Well, that wraps up our discussion on healthcare disparities in patients with endometriosis. Melissa, thank you so much for participating in this episode.

**Dr. Simon:**

Thank you, Linda, it's been my sincere pleasure.

**Dr. Bradley:**

And we hope that this has been an interesting and informative discussion on strategies to address healthcare disparities in endometriosis. Unfortunately, our time is up. Thanks for listening.

**Announcer:**

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