

119TH CONGRESS
1ST SESSION

H. RES. 256

Supporting the designation of March 2025 as Endometriosis Awareness
Month.

IN THE HOUSE OF REPRESENTATIVES

MARCH 26, 2025

Mr. DAVID SCOTT of Georgia (for himself, Mrs. MILLER-MEEKS, Ms. WILLIAMS of Georgia, Mr. CRENSHAW, Mr. BACON, Mr. BISHOP, Ms. CHU, Ms. CLARKE of New York, Ms. LOIS FRANKEL of Florida, Mr. JOHNSON of Georgia, Mrs. McIVER, Ms. NORTON, Mr. PANETTA, Ms. SEWELL, Ms. STEVENS, Ms. STANSBURY, and Ms. TLAIB) submitted the following resolution; which was referred to the Committee on Energy and Commerce

RESOLUTION

Supporting the designation of March 2025 as Endometriosis
Awareness Month.

Whereas endometriosis is a disease in which the type of tissue that normally grows in the uterus (the endometrium) also grows outside of the uterus;

Whereas endometriosis is one of the most common gynecological diseases in women, and occurs in 1 in 10 women of reproductive age;

Whereas the cause of endometriosis is not known, but risk factors include—

(1) having a mother, sister, or daughter with endometriosis;

- (2) menstrual cycles that started at an early age;
- (3) menstrual cycles that are short; and
- (4) periods that are heavy and last more than 7 days;

Whereas, for many women, the only way currently available to be certain of an endometriosis diagnosis is to have a surgical procedure known as a laparoscopy;

Whereas women experience a delay from three to eleven years between the first symptoms of pain and the final endometriosis diagnosis, which can lead to lower quality of life and high medical costs;

Whereas, for many girls and women, endometriosis is a life-long chronic disease that can affect relationships, school, work, fertility, and daily life;

Whereas the primary symptoms of endometriosis include pain and infertility, and many with endometriosis live with debilitating, chronic pain;

Whereas, approximately 75 percent of women with endometriosis experience a misdiagnosis;

Whereas the management of symptoms of endometriosis may include surgery, gonadotropin-releasing hormone (GnRH) antagonists, and many other medical treatments;

Whereas endometriosis is associated with increased health care costs and poses a substantial burden to patients in the health care system;

Whereas, in the United States, the estimated average direct health care cost associated with endometriosis per patient is more than \$13,000 per year;

Whereas 40 percent of women with endometriosis report impaired career growth due to endometriosis, and approxi-

mately 50 percent of women with endometriosis experience a decreased ability to work;

Whereas the Centers for Disease Control and Prevention found that the average number of “bed days” for patients with endometriosis was 18 days per year;

Whereas women with endometriosis can lose 11 hours per workweek through lost productivity;

Whereas the physical and psychological impact of endometriosis affects all domains of life, including social life, relationships, and work;

Whereas medical societies and patient groups have expressed the need for greater public attention and updated resources targeted to public education about this unmet health need for women;

Whereas there is a need for more research and updated guidelines to treat endometriosis;

Whereas there is an ongoing need for additional clinical research and treatment options to manage this debilitating disease; and

Whereas there is no known cure for endometriosis: Now, therefore, be it

1 *Resolved*, That the House of Representatives—

2 (1) strongly supports the goals and ideals of
3 Endometriosis Awareness Month;

4 (2) recognizes the need for early detection and
5 treatment of endometriosis, increased education for
6 health care providers, and more culturally competent
7 care;

1 (3) remains committed to supporting and fund-
2 ing endometriosis research for more effective treat-
3 ments, increasing fertility, and, ultimately, a cure;
4 and

5 (4) encourages the people of the United States
6 to observe the month with appropriate awareness
7 and educational activities.

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