

The importance of quantifying the adverse effects on healthcare-related quality of life in people with benign gynecologic conditions



Benign gynecologic conditions are pervasive and can have significant negative effects on personal, physical, psychological, and social well-being and health-related quality of life (QoL). Benign gynecologic conditions can be classified as neither infectious nor malignant conditions that uniquely affect people with female reproductive organs, including but not limited to polycystic ovary syndrome (PCOS), endometriosis, adenomyosis, heavy menstrual bleeding, premenstrual dysphoric disorder, uterine leiomyomata, endometrial polyps, infertility, pelvic organ prolapse, and postmenopausal syndrome. A 2019 study evaluating the global burden of benign gynecologic conditions estimated that there were 21,831,147 years lost to disability (YLD) worldwide (5.05% of all YLDs) (1). This is more YLD than human immunodeficiency virus and acquired immunodeficiency syndrome, malaria, and tuberculosis combined (1.08%). Despite this massive global burden of disease, there is insufficient data quantifying the impact these disorders have on health-related QoL, including productivity in the workplace, at an individual level for people with female reproductive organs. This is problematic for patients, clinicians, researchers, and policymakers alike seeking new practice improvements that would help alleviate the disease burden.

One example of recent emerging evidence regarding the negative impact on the lived experience of people with benign gynecologic conditions comes from within the field of endometriosis research. A study that evaluated presenteeism, defined as reduced effectiveness at work or when doing household chores, and absenteeism (time taken out of work) in people with endometriosis found that there is a significant association between patient-reported severity of endometriosis symptoms experienced and reduced hours of employment and household productivity lost, with severe symptoms leading to greater productivity loss compared with those reporting mild symptoms (2). Furthermore, a study on the economic burden solely of endometriosis estimated that indirect and direct costs from lost productivity at work, hospital admissions, medical treatments, and surgical procedures for endometriosis-related symptoms total roughly \$22 billion per year in the United States (3). Healthcare-related QoL has been also investigated in patients with uterine fibroids. A population-based survey of 1,443 US women concluded that symptomatic fibroids were significantly associated with decreased QoL, particularly impacting racial and ethnic minorities and women in lower income brackets (4).

In this issue, Huddleston et al. (5) provide one of the first insights into employment-related outcomes in a large cohort of patients with PCOS: The study hypothesizes that the wide array of symptoms associated with PCOS, encompassing gynecologic, dermatologic, metabolic, and mental health

concerns, translates to reduced health-related QoL and one's ability to participate in professional life. In this study, a cross-sectional survey was designed to identify whether an association exists between PCOS and reduced work productivity and what factors associated with PCOS may contribute to decreased work productivity. Interestingly, this novel research shows that over half of respondents identified a time when they had to miss work because of PCOS-related symptoms; a majority felt they were held back from work because of their disease; and 72% felt the quality of work produced was negatively impacted by PCOS. When evaluating sociodemographic associations, Black respondents had higher odds of missing work, independent of income or insurance status, highlighting the need for further research into disparities in the lived experience of those with benign gynecologic health disorders that differentially impact various racial demographics.

The welcomed research produced by Huddleston et al. (5) underscores the imperative that researchers continue to investigate and quantify the social and economic impacts of benign gynecologic disorders. Armed with more quantitative information, clinicians, employers, and policymakers can continue to grow their understanding of the true disease burden of benign gynecologic disorders, target areas for further research, create funding initiatives, and develop interventions that help alleviate these burdens that negatively affect so many members of the population.

CRedit Authorship Contribution Statement

Elizabeth L. Wolfe: Writing – original draft. LaTasha B. Craig: Writing – review & editing.

Declaration of Interests

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