



Press Release

Contact: Sarah Sherwood 650-380-9102

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THE "MILLION WOMEN MARCH FOR ENDEOMETRIOSIS" RECEIVING THOUSANDS OF REGISTRATIONS TO CREATE CALL TO ACTION IN WOMEN'S HEALTH

Grassroots Effort Draws Women and Their Families from Many Different U.S. and International Cities

Washington, DC — In a push for more public education and funding of women's disorders that cause pain and infertility, an internationally coordinated effort called the Million Women March for Endometriosis will occur worldwide on Thursday, March 13, 2014, in dozens of international capitals, as well as on the National Mall in Washington, DC.

Approximately 7,000 women worldwide have been involved in preparing for the "Million Women March," which began on Facebook and whose numbers have been growing steadily since the campaign started about eight months ago. An estimated 176 million women and girls have endometriosis, according to several different reproductive health organizations.

"Women who suffer from endometriosis wait on average more than six years before receiving an accurate diagnosis – that's why the American Society for Reproductive Medicine is an advocate for the Million Woman March," says **Linda C. Giudice, MD, PhD, president of ASRM**, "so women and their families can better manage their health."

"As a strong advocate for women's health and well-being, ACOG is proud to co-sponsor the Million Women March for Endometriosis," said **Jeanne A. Conry, MD, PhD, president of ACOG**. "We need to find a cure for endometriosis and to develop non-invasive tests to diagnose this painful condition."

The March will include awareness campaigns in Amsterdam, Belfast, Berlin, Brasilia, Buenos Aires, Copenhagen, Dublin, Helsinki, Kingston, Lisbon, London, Madrid, Oslo, Reykjavik, Rome, Stockholm, Valleta, and Washington, DC, with the largest gathering in the US.

"As a society, we need to take a hard look at the system and the way that economic forces are affecting both medicine and female diseases," says **Camran Nezhat, MD, chair, AACF Stanford University School of Medicine, director, Center for Special Minimally Invasive and Robotic Surgery and**

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Stanford clinical professor of OBGYN, who is leading the effort. "The trend toward rationed medicine is making it difficult for medical providers to take the time to listen to the patient with ambiguous symptom profiles, instead of examining patients in a holistic way that ensures a good quality visit in the exam room."

In addition to the broad goal of simply raising awareness, organizers will be seeking change in the following sectors:

- **Government-Funded Health Organizations**

A panel of experts will work with U.S. governmental agencies: The National Institutes of Health (NIH), Centers for Disease Control (CDC), the Department of Health and Human Services (HHS), and the office of the Surgeon General – to redirect funds and efforts to focus on common women’s diseases such as endometriosis, fibroids, and chronic pelvic pain so that resources are visible to the public.

- **Medical and Nursing School Educational Institutes**

According to leading reproductive health organizations, even after numerous visits to their pediatricians, primary care physicians, gynecologists, school nurses, and emergency room practitioners, millions of women and girls with endometriosis, fibroids, and chronic pelvic pain are still undiagnosed for several years or are receiving grossly inadequate care.

- **Public Education Campaigns**

Researchers, medical professionals and everyday women will continue to spread awareness in the media and in our local communities, making requests to private foundations to consider supporting research and outreach so that a cure can be found and noninvasive screening tests can be developed.

"Part of our effort includes educating our nation’s medical and nursing schools," says **Ceana Nezhat, MD, vice president, AAGL Scientific Program Chair, 42nd AAGL Global Congress on Minimally Invasive Gynecology and clinical associate professor, Emory University School of Medicine.** "Therefore, we will be encouraging needed change at these public and private institutions. We will also be asking medical researchers to help us find cures and develop noninvasive tests for disorders that have been devastating millions of lives for thousands of years."

Participants can sign up at <http://www.millionwomanmarch2014.org/get-involved/> and join the Facebook campaign at <https://www.facebook.com/groups/130895160440864/>. The program will consist of events around the National Mall in Washington, as well as coordinated events in foreign cities on the

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same day. Thirty-nine countries are represented so far, with roughly 7,000 registrants to date. The display and programs are free and open to the public and will be held at the National Mall, which is fully accessible.

“As an endometriosis sufferer, I have decided to spread the word about endometriosis by taking my message on the road,” says Lindsay Murphy, who has suffered from the disease for 22 years. “I don’t want women to suffer what I went through. I want to do my part. So, I now live full time in an RV and I’m traveling throughout the US talking with anyone and everyone about endometriosis. I will be attending the Million Women March for Endometriosis in Washington, DC. It’s time to unite women to take a stand against endometriosis. Educating people about the effects and working with our government and Congress to allocate funding to develop noninvasive diagnostic tests and early detection is key to getting the upper hand on this horrible disease.”

Studies carried out in the USA, the UK, and Australia demonstrate that the difficulty in timely diagnosis of endometriosis is universal. The delay in diagnosis was recorded as 9.28 years in the North American Endometriosis Association Survey of 4,000 members; this includes a delay in the patient seeking help from a physician for an average 4.67 years and a delay of 4.61 years in the physician making the diagnosis of endometriosis.

“We are looking forward to this march on Washington,” says **Dr. Robert Zurawin, associate professor, Division of Gynecology, Baylor College of Medicine.** “Because people need to be aware of these ‘invisible illnesses’ and how much they affect society, not only women.”

“The best medicine in the world is not an app or a new piece of technology,” adds Nezhat. “It is simply taking the time to listen to the patient and believe her—just like Hippocratic physicians did 2,500 years ago.”

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