human reproduction   **SUPPLEMENTARY DATA**

Sub-Analysis Pain

(i) **Prevalence of Fatigue**

All women:

Prevalence Fatigue **all women**:

Endometriosis	Control
$N = 554$	$N = 548$
$N = 281$ (50.7%)	$N = 123$ (22.4%)

Prevalence Fatigue **all women** without confounding effects[1]:

Endometriosis	Control
$N = 46$	$N = 77$
$N = 10$ (21.7%)	$N = 7$ (7.5%)

Women without pain:

Prevalence Fatigue women **without pain**:

Endometriosis	Control
N 243	$N = 480$
$N = 81$ (33.3%)	$N = 92$ (19.1%)

Prevalence Fatigue women **without pain** without confounding effects[1]:

Endometriosis	Control
$N = 42$	$N = 76$
$N = 7$ (16.6%)	$N = 6$ (7.9%)

Women with pain:

Prevalence Fatigue women **with pain**:

Endometriosis	Control
$N = 317$	$N = 82$
$N = 205$ (64.7%)	$N = 34$ (41.5%)

Prevalence Fatigue women **with pain** without confounding effects[1]:

Endometriosis	Control
$N = 15$	$N = 9$
$N = 3$ (20%)	$N = 1$ (11.1%)

[1]Confounding effects: depression, BMI, insomnia, nulliparous and occupational stress.

(ii) **Association chronic pain and fatigue:**

Chronic pain	Frequent fatigue			
	Crude OR	*P*-value	**Adjusted OR[2]**	*P*-value
	5.09 (3.88; 6.67)	<0.001	2.22 (1.52; 3.23)	<0.001

→ Pain is associated with fatigue but fatigue is always higher in the endometriosis group, even without pain.

[2]Adjusted for endometriosis, BMI, chronic pain, insomnia, depression, motherhood and occupational stress.