

AUTOIMMUNITY BY THE NUMBERS: WHAT THE STATISTICS REVEAL (AND WHY IT MATTERS)

06/27/2025

ASK DR. HIBA

NO. 010

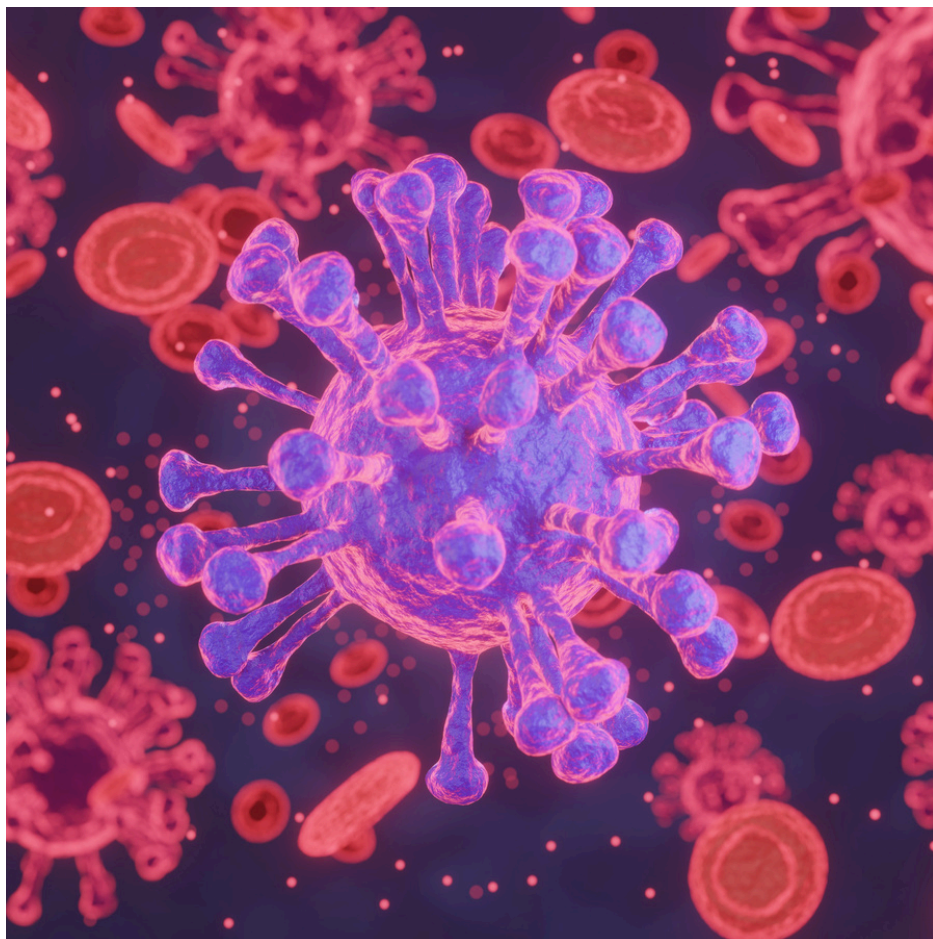
Autoimmune diseases are often called “invisible illnesses.” They don’t always show up on the outside. They don’t always have clear beginnings. And too often, they’re missed, dismissed, or misunderstood—for years.

But when we look at the numbers, one thing becomes crystal clear: autoimmunity isn’t rare. It’s rising. And it deserves more of our attention—especially before a diagnosis ever arrives.

This article isn’t about fear. It’s about awareness. Because when we understand the scope of autoimmune disease, we can stop normalizing symptoms, start asking better questions, and change the trajectory of health—for ourselves, our families, and the next generation.

The Numbers Are Bigger Than Most People Realize

There are over 100 identified autoimmune conditions, and that number continues to grow as we learn more. These include well-known conditions like rheumatoid arthritis, lupus, multiple sclerosis



and type 1 diabetes—as well as lesser-known ones like Sjögren’s syndrome, autoimmune hepatitis, and dermatomyositis

In the United States alone, it’s estimated that more than 50 million people are living with an autoimmune condition. That’s more than cancer and heart disease combined.

And here’s what’s even more sobering: the incidence is increasing—especially in children.

Autoimmunity is no longer just something that “runs in families” or affects people later in life. It’s affecting younger and younger populations, which means early education, awareness, and prevention are more important than ever.

Women Are Disproportionately Affected—Here's Why

Close to 80% of those diagnosed with autoimmune disease are women.

Why? There's no single answer, but several key factors are at play:

- **Hormonal fluctuations**, particularly involving estrogen and progesterone, may influence immune activity
- **Pregnancy and postpartum shifts** can trigger or unmask autoimmune responses
- **X-chromosome dynamics** (women have two, men have one) can affect immune regulation
- **Cultural and social pressures** may contribute to chronic stress and delayed care

This isn't just biology—it's about how women's bodies are uniquely wired to balance immune defense and tolerance. And when that balance is disrupted, the immune system can become hyperreactive.

The Average Time to Diagnosis? 4 to 6 Years

One of the most staggering statistics: it takes an average of 4 to 6 years to receive a proper autoimmune diagnosis.

Why so long?

Because the early signs of autoimmunity are often vague. Fatigue, joint aches, brain fog, gut issues, anxiety, skin changes—they're common, and they're easy to chalk up to stress, aging, or "just life."

In many cases, symptoms are treated in isolation—digestive meds for IBS, antidepressants for mood shifts, pain relievers for joint inflammation—without stepping back to ask the bigger question: What's driving all of this?

That's where traditional medicine can fall short—not for lack of care, but for lack of a framework that sees patterns across systems.

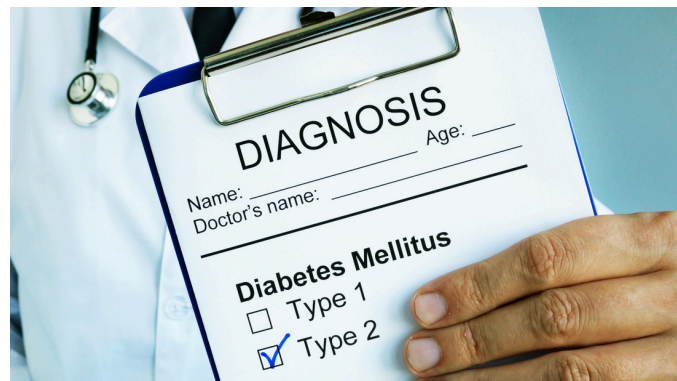
The Problem Isn't Just Late Diagnosis. It's Missed Opportunity.

What these stats really tell us is that we're catching autoimmune disease too late—after damage has occurred, after symptoms have disrupted life, and after the immune system has been dysregulated for years.

But what if we didn't wait?

What if we looked for early immune dysregulation the same way we screen for cholesterol or blood pressure? What if we asked about family history, checked for predictive antibodies, and took those early "mystery symptoms" seriously?

In functional and root-cause medicine, that's exactly what we do. We don't wait for disease to meet diagnostic criteria. We intervene when the body starts whispering—before it has to scream.





Let's Stop Normalizing Symptoms—and Start Listening to Them

If you're exhausted all the time, bloated after every meal, breaking out in rashes, or constantly feeling off—you deserve to be heard. You deserve more than “everything looks normal.”

We need to shift the culture around autoimmunity. That means:

- Educating earlier
- Testing smarter
- Looking for patterns, not just isolated symptoms
- Trusting people when they say something isn't right

And perhaps most importantly, it means creating space for proactive care—not just reactive treatment.

Final Thoughts: The Numbers Are Real. But So Is the Hope.

Autoimmunity isn't going away. The numbers show us that. But the real takeaway here isn't just how many people are affected—it's how many opportunities we have to do better.

Better recognition. Better questions. Better timing. Better care.

When we bring awareness to the data, we begin to change the story. We move from surviving disease to preventing it. From feeling dismissed to feeling empowered. From scattered care to whole-person healing.

We have the tools. We just need to use them sooner.

**To Your Health,
Hiba Georges, MD**