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A day of action around women's health

While women and girls make up 50% of the population, historically they've been severely under-represented in healthcare research and medicine. Even today, there are studies that will affect women's health that have included no data from women.

For many years, only men were used as study subjects, and the results were simply extrapolated to women. This was partly due to researchers' concerns about menstrual cycles, pregnancy and related hormone levels, and the fact that researchers believed women were taking care of families or working, and were therefore too busy to participate.

Why is this a problem?

This is a dangerous practice, resulting in women often going undiagnosed on gender-neutral conditions such as heart attacks or sleep apnoea, because their symptoms can differ from those of their male counterparts. Physicians have been known to miss stroke symptoms in women, despite women having a higher stroke risk than men.

If these differences aren't being studied, science can't develop the appropriate diagnostic tools or offer effective treatment. In short, the medical system, as a whole, understands less about female biology than male biology, and still needs to catch up.

"Because of research, we know that even down to the cellular level, the genetic level, there are sex differences in those cells," says Janine Clayton, director of the US NIH Office of Research on Women's Health.

So, on 28 May, we observe International Day of Action for Women's Health, to celebrate the strides made in ensuring that women enjoy better involvement and inclusivity in medical research, for the purpose of better health outcomes. It also serves as a reminder to the authorities, international agencies and for-profit organisations of their responsibility towards women's health and rights.

There have been some successes:

- Tampon manufacturers are now using real blood and real people in the testing of their products before production and distribution. In the past, blue saline was used, with a synthetic glass device representing the vagina. There are also better standards for absorbency, which improve quality and reduce health risks.
- There is greater awareness of the need to examine women's health separately from that of men in clinical trials, particularly as it pertains to women of colour and women with disabilities.
- More technology is being developed around women's health, such as femtech, cycle-tracking apps, and smartwatches that inform wearers when they're ovulating.
- We're seeing a better representation of women in clinical studies.
- More female researchers are publishing today than ever before, and the numbers are growing.
- More funding is being allocated to women's health.
- In the US, both the NIH and the FDA now have offices to ensure equity not only for women, but also for ethnic and racial minorities.

Bottom line

Society has come some way in addressing inequality, but there's still much work to be done in the interests of better women's health outcomes. It's important to keep advocating for greater inclusion and representation of women in medical research, so the current momentum can be sustained.

https://journals.sagepub.com/doi/10.1177/00031348211029853 | https://www.forbes.com/sites/forbesbusinessdevelopmentcouncil/2023/03/07/ignored-and-underrepresented-the-impact-of-excluding-women-in-healthcare-research/?sh=74c96058628 | http://www.may28.org/ | https://speakingofmedicine.plos.org/2024/03/21/closing-diagnostic-gaps-to-achieve-parity-in-womens-healthcare/ | https://www.wipo.int/policy/en/news/global_health/2023/news_0002.html