

American Medical Women's Association

Position Paper on Sex and Gender Specific Medicine

Background:

Sex- and gender-specific healthcare is an important women's health issue, and the US healthcare system often fails to meet women's health care needs. Statistics generated by the 2001 IOM report "Exploring the Biological Contributions to Health: Does Sex Matter?" verify that treatment decisions based on data used by clinicians and provided in medical education can be very different when analyzed according to sex and gender. This holds true across the spectrum of prevention, diagnosis, evaluation, treatment and palliation. In some instances, those treatment decisions, if not sex- and gender-specific, can be detrimental to the health of women.

Despite many considered attempts to codify data based on sex- and gender-specific research, and to create women's health curricula, recent findings confirm that only a small percentage of practicing providers actually incorporate this knowledge into their clinical practices. And in spite of the establishment of the Office of Women's Health at the National Institutes of Health, a 2000 study in the Journal of Women's Health reveals that even though 80% of research included women, only 25% of outcomes data were analyzed by gender, and very few clinical trials report results by gender. Other research shows that even though 60% of physicians are aware of the new NCEP lipid guidelines for women, only 25% of physicians actually implement those guidelines. Additionally, in a managed care database of 9,000 women patients, only 12% of high risk women attained the optimal level of all the lipid subfractions recommended.

Although 20 Centers of Excellence and 12 Community Centers of Excellence in Women's Health have been funded by DHHS since 1996, in 2007 it was announced that those centers will no longer be funded. The existing Residencies and Fellowships in Women's Health have also gradually been subjected to budget cuts. AMWA's Position on Sex- and Gender-Specific Medicine:

- I. AMWA advocates public policy that recognizes that every aspect of a citizen's health is influenced by sex and gender, and for policy that ensures that all aspects of medical and provider education as well as healthcare delivery are held to standards that reflect this principle.
- II. AMWA advocates public policy that not only ensures the preservation of the national offices of Women's Health already established in the US (NIH OWH, CDC OWH, UPHSS OWH), but promotes development of other appropriate offices in Women's Health at the Federal level.

- III. AMWA advocates continuing research and research institutions that not only include both genders, but analyze and report data according to sex and gender.
- IV. AMWA advocates for incorporation of that research into curricula that are comprehensive, sex- and gender specific, evidence-based and will promote sound decision making.
- V. AMWA advocates for incorporation of sex- and gender-specific curricula into ALL forms of physician and provider education, including medical schools, residencies, fellowships, midlevel training programs, and continuing medical education venues.
- VI. AMWA advocates for a method of certification that allows consumers to be assured that their provider has completed educational requirements that are specific to sex-and gender-based information.

AMWA's Position:

AMWA believes that healthcare delivered to women, 52% of the American population, should be comprehensive, reflect the findings of sex- and gender-specific research, and be available, affordable and easy to access and use. We support the definition of Women's Health put forward by the American College of Women's Health Physicians: Women's Health is centered on the whole woman in the diverse contexts of her life and grounded in an interdisciplinary sex- and gender-informed science.

We not only support continued funding of sex- and gender-based research and development of appropriate curricula reflecting the results of that research, but recognize the need to translate that information into the practices of all providers who take care of women.