Gender-specific health, a proposal for the future

It is with great pleasure that with this editorial we present the first issue of the Italian Journal of Gender-Specific Medicine, Italy’s first and only “gender-specific” scientific journal.

The editorial project, which Il Pensiero Scientifico Editore worked on for almost a year, with the unconditional cooperation of Novartis, deals with the topic of gender-specific medicine and aims to contribute to the further development and spread of a culture of gender-specific medicine in our country.

Men and women are naturally different, and their brains evolve differently depending on their individual history. The inequalities between men and women are biological and social, health-related and cultural, ethical, religious, financial and even, in these times of Expo, dietary. Within this complex situation, gender has come to be recognised (2006, WHO) as one of the factors that determines health, a bridge between social and health-related aspects. A great many scientific studies have shown that being man or woman, male or female, conditions the onset and evolution of illnesses, diagnostic and therapeutic approaches, rehabilitation and healing.

A paradox has increasingly emerged over the past few decades: men gain years in health, whereas women gain years of disability. Does this depend on biological factors, social factors or both? And gender becomes the focal point of the debate, because in order to evaluate health inequalities, we cannot overlook “gender”, one of the key variables.

In Italy the gender-specific approach has yet to take off; a great deal is already being done, however this is not enough and for the time being we are lacking gender-specific healthcare, social, cultural and political strategies. And this is despite the fact that social inequalities are responsible for one third of all deaths in Europe alone. Promoting gender-specific research and implementing gender-specific policies means dealing with differences and inequalities and taking action to guarantee equity in terms of treatments and access to healthcare, and more besides, to men and women.

The Italian Journal of Gender-Specific Medicine is being established precisely to stimulate debate and favour the diffusion of the gender-specific culture through the involvement of the various stakeholders recognised as being able to fight inequality: doctors, interns and specialists, clinical and basic researchers, pharmacologists, decision-makers, payers, healthcare directors, economists and bioethicists, in order to share experiences and contacts with all those committed to promoting gender-specific medicine and building a network of professionals and interdisciplinary relationships that favour its uniform application.

The publication of the journal, which has an international scope and includes contributions in both Italian and English, was made possible by a scientific committee and an editorial board including key players in the healthcare, institutional, economic, bioethics and general culture fields.

Each issue will deal with at least three macro-areas:

- current affairs, with news, summaries, interviews with key players on the national and regional health scenario and updates on European, national and local regulations and social policies;
- from literature and from the world, summaries of contributions of special interest published in international journals, highlighting and reporting on events and congresses;
- reviews and original articles to which the central part of each publication is dedicated, for scientific updates, summaries of trials or observational research, subgroup analysis, narrative reviews or systematic reviews.

The first issue of the journal is introduced by an editorial by Giovannella Baggio of the University of Padua, taking a closer look at the history and evolution of gender-specific medicine, starting from the well-known editorial by Bernardine Patricia Healy published by the New England Journal of Medicine. Baggio examines the interdisciplinary dimension of gender-specific medicine, which studies the influence of sex and gender on human physiology, pathophysiology and pathology. All evidence-based medicine is undeniably based on studies conducted primarily in men, calling for the need to restudy illness in terms of gender. Baggio focuses on cardiovascular diseases, particularly myocardial infarction, which represents one of the fields of health most extensively explored in terms of gender and in which we hope for an application of gender-specific medicine in everyday clinical practice.

Flavia Franconi (University of Sassari) defines the terms “sex” and “gender” and their complex and continuous interactions, so that it is not always easy to distinguish one from the other. The differences begin to be detected, although women in clinical practice are still
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disadvantaged, with less appropriateness of care, reduced safety profile of drugs and major adverse events, to which women are more vulnerable. The context is crucial for health, epigenetics reveals the ways in which society changes the biological body, eliminating the dichotomy between sex and gender. The author calls for the introduction of evaluation systems that use gender-related standards.

This is followed by Rita Ostan and Claudio Franceschi (University of Bologna) with Daniela Monti (University of Florence) who focus on certain aspects of female longevity and the genetic and cultural aspects that characterise it, in an attempt to understand the reasons that allow women to live longer. The researchers discuss the specific genetic traits inherited from the mother and certain cultural aspects that affect the early stages of life and characterise its behaviour.

In their paper, Renato Razzolini and Carlo Dal Lin, of the University of Padua, examine the gender-specific differences in decompensated heart failure, a growing health problem in the western world that is more significant in women than in men, especially in old age. The review examines the characteristics of cardiac insufficiency in terms of epidemiology, genetics, pathophysiology, symptoms, treatments and prognosis. The differences, the Authors conclude, also suggest that different therapeutic intervention is required.

Carlo Gabelli, who studies cerebral ageing at the University of Padua, starting from the assumption that women are more exposed to the risk of Alzheimer’s dementia (a disease that is increasing dramatically, to the extent that by 2050, one in every 85 people will have it), analyses to what extent and why gender affects the biology of the brain, influencing the cognitive functions of males and females in different ways. The paper analyses the genetic aspect, the menopause, hormones, but also the environment, especially education and risk factors such as type 2 diabetes and hypertension.

This is followed by an interesting article on gender-specific medicine as a field of research that favours interactions with other areas of research, first and foremost sociology and the philosophy of law, disciplines that led to the advent of “gender identity” and their full entitlement to rights, especially the right to health.

Orsetta Giolo and Maria Luisa Bernardini of the University of Ferrara start with gender-specific criticism, highlighting the similarities with gender-specific medicine that find their raison d’être in the same presuppositions and aims: an equal promotion of the differences and effectivity of rights. The Authors focus in particular on the “dilemma of differences” and conclude by stating that gender-specific medicine deconstructs the stereotypes that have influenced medicine, as well as law, politics and society.

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