TO WOMEN'S HEALTH

DR ALYSON J. MCGREGOR SHINES A LIGHT ON WHY WOMEN ARE TREATED DIFFERENTLY IN THE MODERN MEDICAL SYSTEM



If you're a woman, you may have noticed that women are treated differently within our medical system than their male counterparts.

We receive different diagnoses, prescriptions, and care pathways for the same conditions. We often walk away from appointment with our complaints unresolved, or even minimized. Some treatments simply don't work as well for us as they do for the men in our lives. And as a result, we experience poorer outcomes in key areas of health.

You may have experienced these differences in care yourself, or seen them happen to your loved ones. If so, it's not your imagination. It's an observable and well-researched fact.

Women are biologically different than men from the level of our DNA on up. We are unique in every cell of our bodies. But because our modern medical system is male-centricmeaning, it is foundationally based on knowledge of, research on, and observation of male bodies/patterns of illnesswomen often don't fit the textbook models by which we as physicians learn to diagnose and treat our patients.

For example, did you know that a woman having a heart

attack rarely presents with symptoms like those you see on television dramas? A woman in cardiac distress might have shortness of breath, general chest tightness, fatigue, or even 'brain fog' - but very rarely will she report the proverbial 'elephant on the chest' and leftarm pain which characterizes male-pattern heart attacks.

This creates a vicious cycle in which women who need and deserve life-saving treatments are misdiagnosed and undertreated - to the point where they may even be sent home from the emergency department while having a heart attack!

The statistics tell us that 60 percent of women who die following a cardiac event have no previous history of heart trouble. But while spontaneous cardiac failure can and does happen, it's my opinion that most of these women could survive if medical practitioners were trained to recognize the symptoms of female heart attack.

Heart disease isn't the only area of concern. Stroke, autoimmune disease, and many other conditions present differently for women. Pharmaceuticals, in particular many generic drugs, are also metabolized differently by women, and so can produce different outcomes and side effects than they do for men.

And yet, we don't have protocols, processes, or safeguards in place to ensure that women receive the care appropriate to their unique biology. Combined with the very real issue of implicit bias this lack of structure within

our medical system results in women's symptoms and experiences being minimized, misconstrued, or simply ignored. It's yet another manifestation of "Honey, it's all in your head."

As an emergency medicine physician, educator, and advocate for women, it's my mission to research and educate both medical practitioners and the general public about why sex matters in medicine. It is unacceptable for women to continue to experience poorer outcomes in key areas of health when we have so much information about sex differences at our disposal.

I and my colleagues are working every day to change our male-centric medical system from within. However, while real change is being accomplished, the process is slow, complicated, and multi-faceted.

In the meantime, it's up to individual women to advocate for themselves in medical situations. Simply knowing that your female biology is different from a man's is a great start, and can lead to valuable conversations with your providers. WW

Dr Alyson J. McGregor, MD, MA, FACEP is the author of Sex Matters: How Male-Centric Medicine Endangers Women's Health and what we can do about it (Quercus), available now. Her TEDx talk 'Why



Medicine Often Has Dangerous Side Effects for Women' has over 1.5 million views and has sparked a national conversation around how sex and gender influence medical treatment and outcomes.

Here are some simple things you can do to ensure you get the best possible care.

- 1 Create a personal 'Med Rec'. This is a list of your conditions, symptoms, prescriptions and other facts. Carry this with you in your wallet/phone to all appointments.
- 2 Ask your doctors lots of questions. Some great conversation starters include
- a. "Have you studied sex differences in your discipline?"
- b. "Do your women patients experience outcomes equal to those of your male patients?"
- c. "Does my condition manifest differently in women than in men? "
- d. "How will this prescription/treatment affect my current birth control, HRT, or pregnancy status?"
- 3 Bring an advocate.
- 4 Be open about what you need from each medical visit. What are you concerned about? What are you afraid of? What did you learn in your own research? .

All great advancements start with dialogue and education. We are on the cusp of a new women's health revolution. Educating/advocating for yourself, and asking questions will help you become part of the solution.