IOM Identifies Gaps in Women's Health Research

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FROM A PRESS BRIEFING HELD BY THE INSTITUTE OF MEDICINE

WASHINGTON – Over the past 2 decades, women's mortality from cardiovascular disease and breast and cervical cancer has declined, thanks to research focused on women's health; however, little progress has been made in addressing debilitating conditions such as autoimmune diseases, addiction, lung cancer, and dementia, according to an Institute of Medicine committee.

"We are pleased with how much progress has been made, but there are some caveats," Nancy E. Adler, Ph.D., chair of the IOM Committee on Women's Health Research and director of the Center for Health and Community at the University of California, San Francisco, said at a press briefing on Sept. 23 to release the report.

Based on the report, "Women's Health Research: Progress, Pitfalls, and Promise," the committee recommended:

- ► Undertaking initiatives that increase research in high-risk populations of women;
- ► Ensuring adequate participation of women in research and analysis of data by sex; and
- ► Creation of a task force to communicate health messages about research results to women and prevent them from receiving conflicting messages from various venues.

Communication is one area in which office-based physicians can play an important role, translating research into their practices, said committee member Alina Salganicoff, Ph.D., vice president and director of women's health policy at the Kaiser Family Foundation. "Their recommendations hold a lot of weight" with their patients, she said.

The report comes 20 years after the creation of the Office of Research on Women's Health at the National Institutes of Health and 25 years after a Public Health Service task force concluded that excluding women from medical research had compromised women's health care.

Before those landmark events, women were not included in research studies as often as men were because of concerns about fetal exposure to potentially harmful substances, the "flux" of hormones, and the assumption that research findings in men would translate to women, according to the report.

There has been little progress in research having an impact on unintended pregnancy, maternal morbidity and mortality, autoimmune diseases, addiction, lung cancer, and other ailments.

The committee found that requiring researchers to enroll women in clinical trials had resulted in advances, yet the benefit of increased participation by women has not yet reached its full potential because researchers usually don't separate the results by sex.

Committee members could not pinpoint why progress was made in some conditions and not others, according to the report, which offered possible explanations such as the extent of attention from government agencies, interest from researchers, understanding of the condition, and political and social barriers.

In addition to major progress in cardiovascular diseases and breast and cervical cancers, the report noted that some progress had been made in reducing the burden of conditions such as depression, HIV/AIDS, and osteoporosis in women.

However, there has been little progress in research having an impact on conditions such as unintended pregnancy, maternal morbidity and mortality, autoimmune diseases, addiction, lung cancer, gynecologic cancers other than cervical cancer, and Alzheimer's disease, according to the report.

"Knowledge about differences in manifestation of diseases is crucial for further studies to identify the underlying biology of disease in women vs. men and to develop appropriate prevention, diagnosis, and treatment strategies for women," wrote the committee members. ■