


 THE BENEFITS OF CARINGSM

MEDICINE ISN'T GENDER NEUTRAL

UNDERSTANDING WHY COULD MAKE US ALL HEALTHIER

Consider the classic Hollywood heart attack. First there's left-arm pain, followed by crushing pressure and then a sweating middle-aged man clutching his heart. Yet women in the midst of a heart attack often present none of these symptoms.

"I thought it was either the flu or nausea," says Nancy Loving of her heart attack, which announced itself with back pressure, light-headedness and nausea. Such symptoms, common in women, often result in female heart attack victims being sent home from the emergency room "with a bottle of Tums," says Ms. Loving, Executive Director of WomanHeart: The National Coalition for Women with Heart Disease, based in Washington D.C.

Why the difference? That's a question doctors are now struggling to answer. The big change, however, is that they are asking the question at all. Until recently, the medical world tended to treat women as if they were simply pint-sized men with slightly different plumbing. Research studies almost never included women, so there were no data documenting the differences. About 10 years ago, the government and the medical community recognized the problem. The results of subsequent gender-inclusive studies are now transforming the way medicine is practiced.

Indeed, the differences between men and women are turning out to be significant in the diagnosis and treatment of everything from heart disease to depression. "There are sex differences at every level—the cell, the

organ, the way the body functions," explains Sally Shaywitz, a neuroscientist and professor of pediatrics at Yale University. For example, we now know there are sex-based differences in both digestive juices and liver enzymes, which explains why men and women often metabolize drugs differently. Men and women also use their brains differently, are susceptible to different diseases and respond differently to treatment. Some diseases even manifest themselves differently. Colon cancers in women, for example, tend to be located higher in the colon. Boys with attention deficit disorder are rowdy, while the girls tend to be quiet.

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"One isn't better than the other," says Sherry A. Marts, vice president for scientific affairs at the Society for Women's Health Research in Washington D.C. "Different just means different."

But recognizing those differences means scientists are now able to ask better questions. Why, for example, do women live longer than men? No one has the answer, although the evidence is clear that males have a higher mortality rate all through their lifetimes, says George Lazarus, a New York pediatrician. The result is a lifespan that's, on average, six years shorter than that of women.

The Institute of Medicine already has drawn

up a list of recommendations for future research on sex-based differences and similarities in a whole host of medical areas. "It is the way medicine is going to be practiced in the next decade," says Marianne Legato, director of Columbia University's Partnership for Gender-Specific Medicine. The first textbook on the topic, edited by Legato, has just been published, and there is talk that gender-specific medicine may become a specialty medical practice.

Consumers are playing a role, too, by educating themselves and bringing their questions to their physicians, says Marts. "Take the issue seriously," she advises. "Do a little bit of

research yourself."

But gender-specific medicine is only the first step, says Sharonne N. Hayes, director of the women's heart clinic at the Mayo Clinic, Rochester, Minn. "In 10 years, I think we will be looking beyond gender." By then, she says, more data will be available on other factors like race and ethnicity, and researchers will have dug deeper into molecular medicine. The goal, she says, is individualized medicine.

After all, she says, right now cardiologists, like plumbers, commonly fix a problem by going around it. "What we really want to do is fix it by stopping the disease process."



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