Gender-specific medicine sets out to conquer Italy

We open the first 2016 issue of the *Italian Journal Gender-Specific Medicine* with a report on an event held on 22 April (the anniversary of the birth of the Nobel prize-winner Rita Levi Montalcini, to whom the initiative was dedicated) at Aranciera di San Sisto in Rome: the celebration of the first national women's health day, promoted by Fondazione Atena Donna, through the Minister of Health Beatrice Lorenzin and approved in June 2015 by a directive issued by the Italian Prime Minister.

The event was a resounding success for the Italian Health Service and Minister Lorenzin. The various presentations confirmed and stressed that a modern society must be aware of the role played by women, which is increasingly important in social, occupational and cultural terms, in its natural capacity to take in needs. The day's activities involved the creation of an area outside the Aranciera of a special space, the "Health Village", open to all those attending, with information booths and the chance for female visitors to undergo different types of screening. Inside, close to the audience and stage, where during the morning, dozens of participants took part in a "managerial workshop" with 10 thematic tables, each one consisting in 12 representatives from leading health institutions, scientific societies and sector associations, health experts, clinician, journalists and citizens' associations. At the end of the session, the guidelines produced were brought together in a manifesto that was presented at the end of the morning, explaining the 10 implementation actions regarding women's health to be put into practice in the years to come. The focus of the day was women's health, as well as gender-specific health, which deals with the biological (sex) and sociocultural differences between men and women. Gender-specific medicine, which the World Health Organisation, in a recent document on European health policy, described as a "load-bearing element for the promotion of health aimed at developing diversified therapeutic approaches for women and men". Therefore, the Italian Ministry of Health and healthcare institutions dedicate great attention to the gender dimension, which must be promoted first and foremost by encouraging research and also by including women in clinical studies.

These are the premises taken up in the publication Quaderno del Ministero della Salute, issue no. 26, titled "Gender as a determinant of health", presented during the day's proceedings. The monograph in the first part includes gender-specific health policy articles, whereas the second focuses on certain illnesses, describing the main differences between men and women, and closes by summarising the characteristics and commitment of the network of Italian experts that supports gender-specific medicine in this country. We are proud that *Italian Journal Gender-Specific Medicine* is mentioned in this chapter of the monograph as a tool "that makes a contribution to this important cultural and political undertaking".

And now for a brief introduction to the new aspects of this journal, which opens this issue with an interesting *commentary* by professor Marek Glezerman on the article published recently in *PNAS*: Sex beyond genitalia: The human brain Mosaic. The professor reiterates that it is the functional capacity, rather than morphology, that defines the male brain and the female brain. Glezerman therefore suggests that the research performed by European and Israeli authors needs a complete review.

A group of male and female authors from the National Institute for Health (ISS), including Walter Ricciardi, describes the results of a study conducted on a large sample of university students and the differences observed in male and female behaviour concerning certain health-related aspects. The authors express their hopes that health promotion and prevention programmes will be developed for both genders.

Privileged access to Intensive care units for men. These are the conclusions reached by Antonella Vezzani, Caterina Manca and Caterina Ermio, who stress that



Therefore, the Italian Ministry of Health and healthcare institutions dedicate great attention to the gender dimension, which must be promoted first and foremost by encouraging research and also by including women in clinical studies.





elderly women are those who receive the least intensive care. Could there be gender biases amongst sector professionals?

In her review, Sandra Brunelleschi, of the Novara School of Medicine, attempts to explain the various factors that play a key role in the appearance of automimmune diseases, which are predominant in women, and in determining gender bias.

One case of atrial fibrillation, involving a couple, is described by Erica Delsignore (Ospedale S. Andrea, Ver-

celli) et al.: in addition, as is known, this form of heart disease has different characteristics in the two genders, and males and females receive different pharmacological treatment.

It is true, national health systems have never studied the problem of smoking in a gender-specific manner. Giovannella Baggio and Francesco Tosetto, of the University of Padua, stress the current urgent need to implement prevention policies focussing especially on the female population, which in developing countries appears set to become "the no-longer sleeping giant of the global cigarette market". This overview is closed by Paola Conti, chair of ENGHEA, Engendering Health Association, who explains how important a gender-specific approach is for occupational safety and health and for the promotion of health in a uniform, global and universal manner for women and men. The priority is to develop, based on gender-specific medicine, gender-specific occupational medicine.

Happy reading to you all

Mariapaola Salmi Editor in Chief mp.salmi@libero.it