

Gender-specific medicine in the Italian and European institutions

Gender-specific medicine is gaining ground in Italy and the rest of Europe, albeit gradually, thanks to the commitment and work of many Italian personalities in the Institutions and medicine fields.

But let's take stock of the events of recent months.

On 27th June, the European Parliament in Brussels hosted an important round table promoted by the Hon. Elena Gentile and Hon. Paola Boldrini titled "Towards a gender-sensitive medicine: matters, tools and policies. Good practices from Italy and Germany". The meeting was attended by a great number of representatives from Italy and the other Member States that have been active in the gender-specific medicine field for years. For full details, please read the item published in the *Gender-specific Medicine Watch* column¹.

In July, the convention "Creating a gender- and sexual diversity-sensitive medicine" was held in the Chamber of Deputies' prestigious Queen's Room and attended by the Italian Minister for Education, University and Research, Valeria Fedeli. The presentation of the Bill drawn up by MP Paola Boldrini was followed by contributions by Roberta Chersevani, National Chair of FNOMCeO, Mario Melazzini, General Manager of the Italian Medicines Agency, and Andrea Lenzi, Chair of the Italian Permanent Conference of Supervisors of Medicine and Surgery Degree Courses. The latter, together with Tiziana Bellini, the Rector's deputy for the Teaching of Medicine and Nursing of the University of Ferrara, described how, last December, the National Conference agreed to the synergistic and homogeneous planning of the introduction of sensitivity to sexual diversity and gender into all university medicine courses for academic year 2017-2018, which is currently in progress. An important achievement and the first of its kind in Europe.

There is also news regarding the gender-specific medicine bill of which the first signatory is Hon. Paola Boldrini. The Bill presented by the MP, a member of the Social Affairs Commission, was transformed into an amendment due to end of the legislative year requirements, and included as article 3 of the Lorenzin Bill, which was approved by the Chamber of Deputies.

We will now move on to review the scientific contributions included in this issue of the *Italian Journal of Gender-Specific Medicine*.

We open with Rosaria Vari, Beatrice Scazzocchio and Sara Del Papa, of the Nutrition Unit of the National Institute of Health's Gender-Specific Medicine Centre, who present "Dietary habits and gender differences"²: lifestyles are influenced by differences in sex and gender and eating habits impact metabolic and epigenetic mechanisms and even response to therapy. Obesity is one of the main risk factors for non-transmissible diseases and is more common amongst women, whereas the visceral form is more common amongst men. Researchers are convinced that males and females metabolise fats differently, due partly to the action of sex hormones and gender differences in eating habits.

Alberto Villani, with Isabella Tarissi De Jacobis, Francesca de Gennaro and Giulia Ceglie, of Ospedale Pediatrico Bambino Gesù in Rome, analyses "Gender medicine and paediatrics: present and future perspectives"³. There is no shortage of data available in literature concerning gender differences in paediatrics. The review examines the scientific data for certain illnesses. The incidence of certain infectious diseases is higher in males and whilst females develop a better, longer-lasting immune response with a protective effect with regards to infections, this puts them at risk of autoimmune and inflammatory diseases. In addition to response to infections, vaccines and immune dysregulation, the differences also affect areas such as neuropsychiatry and orthopaedics.

In the review "Anorexia nervosa: an update on genetic, biological and clinical aspects in males"⁴, Emilia Manzato (psychiatrist and head of the Eating Disorders Unit of Ospedale Salus di Ferrara) and her co-authors focus on the fact that although anorexia nervosa is usually considered a female condition, it is not uncommon amongst males. The study focuses on the male gender and asks why diagnosis is underestimated: for merely cultural reasons or due to diagnostic deficiencies? The review considers the epidemiological data, the gender differences affecting the development of the disease, the clinical aspects amongst men and the greater difficulty of diagnosing and treating the condition early in males.

Ignazio Majolino and Marta Canesi, of the Institute for University Cooperation in Rome, take us to Iraq with their account of an interesting initiative, "A capacity-

building project for the establishment of a hematopoietic stem cell transplant (HSCT) center at the Hiwa Cancer Hospital (HCH), Sulaymaniyah, Iraqi Kurdistan: A look inside professional barriers and gender issues"⁵. For over two years, an Italian team has conducted a capacity-building project in Iraqi Kurdistan involving the establishment of a haematopoietic stem cell transplant centre at Hiwa Cancer Hospital in Sulaymaniyah. This project, which is funded by the Italian Agency for Cooperation for Development, has involved dozens of specialists in the blood cancer and transplant fields. So far 29 autologous transplants and 7 allogenic transplants have been performed. This article describes the obstacles encountered by the health professionals, due partly to cultural and linguistic issues and partly to care and the type of patient.

Last but not least, Stefano Castriota (University of Bolzano) and Marco Costantino (Consorzio CTM Altromercato) present the article "The effect of Fair Trade on ethnic minorities: evidence from a field study in Vietnam"⁶. The research compares indicators of economic and social wellbeing in two samples of women belonging to ethnic minorities that produce craft goods, of which one belonged to a fair-trade organisation and the other did not. Whilst it does not appear to affect economic earnings,

belonging to a fair-trade organisation does, on the other hand, appear to favour the women's involvement in the economic decisions of the family.

To all those who follow us, we wish a good read.

References

1. La medicina genere-specifica arriva al Parlamento europeo. Ital J Gender-Specific Med 2017; 3(2): 85.
2. Varì R, Scazzocchio B, Del Papa S. Dietary habits and gender differences. Ital J Gender-Specific Med 2017; 3(2): 55-58
3. Tarissi De Jacobis I, de Gennaro F, Ceglie G, Villani A. Gender medicine and paediatrics: present and future perspectives. Ital J Gender-Specific Med 2017; 3(2): 71-80
4. Manzato E, Gualandi M, Tarabbia C, Romano D, Di Pascoli L, Scanelli G. Anorexia nervosa: an update on genetic, biological and clinical aspects in males. Ital J Gender-Specific Med 2017; 3(2): 59-70
5. Majolino I, Canesi M. A capacity-building project for the establishment of a hematopoietic stem cell transplant (HSCT) center at the Hiwa Cancer Hospital (HCH), Sulaymaniyah, Iraqi Kurdistan: A look inside professional barriers and gender issues. Ital J Gender-Specific Med 2017; 3(2): 47-54
6. Castriota S, Costantino M. The effect of Fair Trade on ethnic minorities: evidence from a field study in Vietnam. Ital J Gender-Specific Med 2017; 3(2): 81-84

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