Report on the EUGenMed final conference “European Roadmap for Implementation of Sex and Gender in biomedicine and health research”.

General and Round table discussion

The round table discussion discussed the possibilities for sustainability of a gender sensitive roadmap for future health in Europe. Marek Glezer as the very first discussant made the important points that the group of people interested in gender medicine is still small and should not be split up into different organisations. He expressed his vision that the gender medicine community should survive as one big community including as many stakeholders and type of stakeholders as possible. That means including lays, students, doctors, researchers, policy makers, and politicians. He mentioned that the International Society of Gender Medicine would be an ideal forum to offer the communication between the different groups and that a EUGenMed follow up sessions at the conferences of the International Society of Gender Medicine would be welcome (pending acceptance of the General Assembly of IGM). A first opportunity for such a meeting would be the 7th Annual conference of IGM in Berlin, 20-21. Sept 2015.

Thorsten Vetter contributed to the round table discussion by pointing out that a new legislation regarding drugs in Europe offers a lot of opportunities and possibilities to include sex and gender aspects. He mentioned particularly the importance of stronger pharmacovigilance and post authorisation observations. Ingrid Klingmann discussed the power and potential of patients’ organisations and particularly the groups studying HIV, have a very powerful patient presentation that is interested in gender aspects.

Ineke Klinge mentioned three priorities in public health. First, to create alliances between academia and policy and she gave some best practise examples from the Netherlands. Second, she mentioned that using more social media will help to make gender medicine more popular. Petra Verdonk pointed out how important it is to connect medical education and public health, and to connect the students in the medical field and in the public health field. Janusz Janczukowicz underlined that for introducing gender into medical and public health education a top-down approach will also be very important. Maeve Cusack and Fulvia Signani agreed to these points.

All discussants agreed that the communication between the different groups interested in gender medicine is of greatest relevance. Ingrid Klingmann pointed out again how important it is to make people more knowledgeable about gender issues, to inform the broad public using internet and Facebook. Lode Dewulf pointed at the need of sustainable and generally agreed goals. He believes that gender medicine will help people to work in a healthy area longer and this will be of benefit to all Europe. It was agreed that the sessions in Berlin will offer a first opportunity to present the results of the EUGenMed final conference clearly.

Furthermore, it was discussed how gender medicine could be made more popular. Claudine Junien argued that ministries should need at start a top-down approach. Marco Stramba-Badiale in contrast pointed out how important it is that gender is introduced into practice and becomes an element of daily work. Lode Dewulf argued that it should go into legislation and that it should become a public issue. For this purpose very good marketing is needed. Digital strategies are needed and YouTube videos for example. Karin Nordmeyer mentioned that the UN Women could also solidarise themselves with goals of gender medicine. They have a summit in 2015 and maybe helpful in supporting the goals.