

Women health care beyond gynecology

Introduction

The women health is mainly taken care of by gynecologists¹⁻³ both in physiological situations such as pregnancy and during divers pathological situations too. The existence of gynecology as a medical field is the result of a variety of biological and physiological properties that distinguish women from men. Such approach might be “summarizing” the women medical properties within hormonal system and anatomical differences which might not be medically a “panoramic” definition.

Indeed, it is not sufficient to describe the medical properties of women within simple gynecological and even biological aspects. In fact, the differences between men and women are at different levels and all should be taken into consideration to optimize the medical care women receive. Such levels include psychology, physiology, pathology and sociology.⁴ For instance, differences have been reported between women and men in term of psychological sensitivities and social status in some cultures as well. Some sex differences have also been reported in animals^{5,6} and might be extrapolated to humans if more evidence are presented within clinical contexts.

These concepts represent illustrative examples of the elements that we need to further include in the daily medical practice to optimize and improve the women health care. Such approaches need the collaboration of different organisms and professionals in addition to the education and the training of the health professionals and also the education of the population at a social level. The implementation of such principles would mean to extend the women health care beyond the gynecological context and will include other fields such as psychology and even sociology. In practice, this means more focus on the women properties beside the hormonal system and considering those other factors and parameters (such as psychology, sociology and physiology) while establishing a diagnosis, prescribing a treatment and validating a medical test or analysis.

Acknowledgements

Abdelaziz Ghanemi is a recipient of a 2013 CAS-TWAS President's Postgraduate Fellowship.

Volume 1 Issue 1 - 2015

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Received: July 07, 2015 | **Published:** August 19, 2015

Conflict of interest

The author declares o conflict of interest.

References

1. Strickland J. Paediatric and adolescent gynaecology. In: DJ Ostlie editor. *Ashcraft's Pediatric Surgery*. 5th ed. USA: WB Saunders; 2010. p. 1015–1027.
2. Grover S. Paediatric and adolescent gynaecology. In: M Zacharin editor. *Practical Pediatric Endocrinology in a Limited Resource Setting*. 1st ed. USA: Academic Press San Diego; 2013. p. 223–232.
3. Bacon JL. Lasers in gynecology. In: H Jelínková editor. *Lasers for Medical Applications*. UK: Woodhead Publishing; 2013. 798 p.
4. Semenyna SW, Honey PL. Dominance styles mediate sex differences in dark triad traits. *Personality and Individual Differences*. 2015;83:37–43.
5. Tajerian M, Sahbaie P, Sun Y, et al. Sex differences in a murine model of complex regional pain syndrome. *Neurobiol Learn Mem*. 2015;123:100–109.
6. Bayless DW, Daniel JM. Sex differences in myelin-associated protein levels within and density of projections between the orbital frontal cortex and dorsal striatum of adult rats: Implications for inhibitory control. *Neuroscience*. 2015;300:286–296.