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Research Gaps and Opportunities to Advance Women's Health March 11, 2025

Research Gaps and Opportunities to Advance Women's Health



- Lack of research on diseases affecting women and girls.
- Limited understanding of biological differences between sexes.
- Need for better ways to prevent, diagnose, and treat conditions that impact women differently.
- Investing in research benefits both women's health and society as a whole

Committee

Sheila P. Burke (Cochair) Baker Donelson and John F. Kennedy School of Government, Harvard University

Alina Salganicoff (Cochair) KFF

Neelum T. Aggarwal Rush University Medical Center

Veronica Barcelona Columbia University School of Nursing

Alyssa M. Bilinski Brown University School of Public Health

Chloe E. Bird Tufts Medical Center and RAND Corporation

Susan Cheng Cedars-Sinai Medical Center **Felina Cordova-Marks** University of Arizona College of Public Health

Sherita H. Golden Johns Hopkins University School of Medicine

Holly A. Ingraham University of California—San Francisco School of Medicine

Robert M. Kaplan Stanford University School of Medicine

Nancy E. Lane University of California, Davis Health System

Jane E. Salmon Hospital for Special Surgery and Weill Cornell Medicine **Crystal Schiller** University of North Carolina at Chapel Hill School of Medicine

Angeles Alvarez Secord Duke University Health System

Methodius G. Tuuli Brown University Warren Alpert Medical School and Women & Infants Hospital

Bianca D.M. Wilson University of California, Los Angeles and California Center for Population Research

NAM FELLOWS

Michelle P. Debbink University of Utah

Tracy E. Madsen Brown University School of Public Health

Background

- The U.S. leads the world in medical research, but breakthroughs in women's health are lacking.
- Basic differences between male and female biology are not well understood.
- Research on female-specific and common women's health conditions is underfunded.
- Advancing women's health research benefits overall scientific progress.



The Need for Women's Health Research



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Healthy women are vital to a healthy society and growing economy.

- Women live longer than men but often have poorer health and more disabilities.
- Women's exclusion from research has created lasting gaps in health knowledge.
- Many barriers, such as finances, location, discrimination, and education, limit women's access to care.
- Advancing women's health benefits everyone's understanding of health.

Identifying Gaps and Opportunities in Women's Health Research



Information gathering meetings where the committee heard from researchers, patients, and other stakeholders



Review of primarily literature, past National Academies and other reports



Analysis of women's health research funding at the National Institutes of Health



"The gaps in women's health research are large and at times feel overwhelming. My personal experiences are exacerbated by the frustrations of not being able to help my patients in more meaningful ways, by witnessing my peers and their daughter(s) suffering from so many gynecological conditions that remain with the same ineffective treatments that I offered to patients as an OB/GYN resident over 30 years ago."

- PARTICIPANT AT COMMITTEE INFORMATION-GATHERING MEETING



Committee's Funding Analysis: Committee's approach to assess women's health research funding at NIH.

- The Research, Condition, and Disease Categorization (RCDC) system has several limitations.
- Instead of relying on RCDC, we analyzed NIH RePORTER data from 2013 to 2023 using multiple methods, including LLM. In April 2024, we downloaded over 800,000 grants.
- We only had access to publicly available grant data, such as titles, numbers, PI names, funding details, abstracts, and public health relevance—excluding grant proposals and progress reports.
- We examined overall funding by institutes, centers, offices, grant type, and women's health-related conditions.



Committee's Funding Analysis: NIH Spending on Women's Health Research

 Women's health research received 8.8% of NIH grants (2013-2023) and 7.9% in 2023

 Intramural research funding for women's health also remains low.

NIH Spending on Women's Health Research is a Small Fraction of Overall Grant Spending



FIGURE. Total NIH grant funding on women's health research, FY 2013–2023 and for FY 2023. SOURCE: Committee analysis.



Committee's Funding Analysis: Distribution of NIH Funding for Women's Health

- Grants funded to study conditions relevant to women's health favored certain conditions.
 - Top 10: breast cancer and some female-specific cancers, pregnancy and infertility, and perimenopause and menopause, as well as conditions that also affect men, such as HIV/AIDS, diabetes, and depressive disorders.
- Low levels of funding for many female-specific conditions.
 - Endometriosis, fibroids, pelvic floor disorders, polycystic ovary syndrome, postpartum depression, uterine cancer, vulvodynia, and others.
 - Yearly funding has been flat over the last decade for many of these conditions.

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FIGURE NIH grant funding for select conditions relevant to women's health, FY 2013–FY 2023. SOURCE: Committee funding analysis.

Examples of Increasing Prioritization of Low-Funded Women's Health Conditions

RADx[®] Tech ACT Endo Challenge

- Launched in August 2024
- Collaboration between the *Eunice Kennedy Shriver* National Institute of Child Health and Human Development (NICHD) and the National Institute of Biomedical Imaging and Bioengineering (NIBIB)
- Focus on advancing non-invasive diagnostics for endometriosis

Specialized Centers for Research on Health Disparities in Uterine Leiomyoma

- In June 2024, NICHD and the NIH Office of Research on Women's Health (ORWH) announced the awarding of funds for two of these centers
- Represents a \$15 million investment in the advancement of research on uterine fibroids



Committee's Funding Analysis: Distribution of NIH Funding for Women's Health



FIGURE. NIH grant funding for women's health research, FY 2013 through 2023, for select female-specific health conditions. SOURCE: Committee analysis.

Committee's Funding Analysis: Distribution of NIH Funding for Women's Health



FIGURE. NIH grant funding for women's health research, FY 2013 through 2023, for prevalent chronic diseases. SOURCE: Committee analysis.



Gaps and Opportunities in Women's Health Research



Priorities for Advancing Women's Health Research

Recommendation 8 describes areas for prioritization needed to advance WHR across the research spectrum, specifically in basic, preclinical, clinical, population, and implementation science research.

- Considerations across the research continuum include:
 - Quality of Life: Address conditions like depression, endometriosis, fibroids, IBS, osteoarthritis, osteoporosis, and PCOS.
 - Early Mortality: Focus on CVD and female-specific cancers.



Priorities in Women's Health Research

Basic Research

 Study hormonal profiles and female physiology to understand sex-based differences in disease risk, pathology, and progression.

Preclinical & Clinical Research

- Investigate causes of femalespecific and gynecologic chronic conditions.
- Collect and analyze sex- and gender-specific data to improve treatment efficacy and assess side effects.



Priorities in Women's Health Research

Population Research

 Population-level research that studies how policies at the system, payor, local, state and national levels affect women's health

Implementation Science Research

 Implementation science research that develops and tests strategies for implementing innovative health care services delivery approaches



Sex as a Biological Variable (SABV)

Why It Matters

- Many studies overlook sex and gender differences, limiting insights.
- Most health research is based on male physiology due to historical exclusion of women in clinical trials.

NIH SABV Policy (2016)

- Requires inclusion of both sexes in studies (unless justified otherwise).
- Mandates consideration of biological sex in study design, analysis, and reporting.

Impact

• Leads to discoveries that improve understanding of sex-based differences (e.g., drug metabolism, treatment responses).

Challenges & Benefits of SABV Implementation

Key Considerations

- Overall uptake and application of SABV policy in practice has not been optimal.
- Although there are limitations for broad implementation, the benefits of incorporating SABV in research far outweigh the challenges researchers may face.

Sample Size & Cost

- Some researchers assume larger sample sizes increase costs, but often, only minimal changes are needed.
- Incorporating SABV can reduce the need for follow-up studies, improving efficiency and scientific impact.

Basic Science Implications

- Inclusion of heterogeneous female models (e.g., intact ovaries, ovariectomized, older females) may require tailored cohort sizes and increased funding.
- Highlights the need for NIH funding to support sex-diverse research.



SABV vs. Sex Differences Research



affect women differently. The 2025 report A New Vision for Women's Health Research: Transformative Change at the National Institutes of Health provides recommendations for including sex and gender in research and strengthening the National Institutes of Health's (NIH) sex as a biological variable (SABV) policy, among other actions.

WHY ANALYZE SEX AND GENDER IN RESEARCH?

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Although women are now enrolled in clinical trials at the same rate as men overall, most studies do not study or analyze sex or gender differences, which is a missed opportunity. Additionally, most foundational health research is based on clinical trials that took place when women were not regularly included, meaning most knowledge is founded on adult male anatomy and physiology.

In 2016, NIH established the SABV policy to recognize the importance of sex in research and address the exclusion or underrepresentation of females in research. The policy instructs researchers to include females and males in study samples (unless there is a strong justification not to); meaningfully consider biological sex in their research; and describe how they will factor all of this into study design, analyses, and reporting in vertebrate animal and human studies. When the policy is implemented effectively, scientific discoveries will result in new knowledge that benefits everyone (e.g., advancing our understanding of how women and men metabolize and react to medications differently). Policies such as the SABV policy are needed not only to raise awareness of and help fill knowledge gaps in women's health, but also for achieving precision medicine and equity in health care more broadly.

When considering SABV, it's important to move beyond the traditional binary definitions of sex and gender, which exclude individuals who are intersex and fail to capture the complexity of how sex characteristics often exist along a spectrum with a range of continuous variations in anatomy, physiology, biochemistry, and even hormones. Recent research across genetics, transcriptomics, and phenotypic traits has shown there is significant overlap and diversity between sexes. While the SABV policy doesn't directly address gender concepts such as identity and roles, advancing women's health research will require a more systematic integration of gender as a key factor.

Key Differences

- **SABV**: Requires considering sex as a variable ٠ in NIH-funded studies but does not replace dedicated sex differences research.
- Sex Differences Research: Focuses on • identifying sex-based variations in conditions or treatments, often requiring larger sample sizes and funding.

Why It Matters

- Integrating sex into study design enhances • findings that benefit both sexes.
- True sex differences research assesses ۰ biological mechanisms driving differences.

More Info

A 2-pager on SABV is available on the project website

Gaps and Opportunities in Women's Health Research



Chromosomes & Women's Health: Gaps & Opportunities

X vs. Y Chromosome Research

- Females (XX) silence one X chromosome to prevent excess gene expression.
- Research has mainly focused on the Y chromosome, leaving X-silencing effects on women's health understudied.

Genome-Wide Association Studies (GWAS)

• GWAS helps identify genetic disease markers but often **excludes sex chromosomes**, limiting insights into sex-specific health risks.



Gaps and Opportunities in Women's Health Research: Chromosomes and Health

Key Findings

- A protein linked to **X-silencing** interacts with other proteins, contributing to autoimmune diseases more common in women (Dou et al., 2024).
- Highlights the role of basic science in explaining why women are disproportionately affected by autoimmune disorders.
- Understanding **X-linked proteins** may lead to breakthroughs in other conditions.



Gaps and Opportunities in Women's Health Research: Female Sex Hormones

• Female physiology is more dynamic due to hormone fluctuations throughout the reproductive life-span.





Female Sex Hormones: Gaps & Opportunities

Why It Matters

- Hormonal complexity has led to the exclusion of women from studies, yet understanding it is crucial for **women's physical & mental health**.
- All organ systems have receptors for ovarian sex hormones, influencing overall physiology.

Key Examples

- Menopause: Declining estrogen levels cause hot flashes, bone loss, insomnia, depression, vaginal atrophy, and weight gain.
- **Depression**: Ovarian hormones play a key role in regulating mood during reproductive years.



Physical Health Conditions: Gaps & Opportunities

Cardiometabolic Disease

• Links exist between **sex hormones & cardiometabolic disease**, but mechanisms remain unclear, limiting treatment insights.

Fibroids

- Leading cause of hysterectomy in the U.S., yet little is known about their pathophysiology.
- Research gaps and Opportunities:
 - Focus has been on **estrogen's role**, with limited study of other hormonal and non-hormonal factors.
 - Unclear why fibroids are more prevalent in Black females.



Endometriosis: Gaps & Opportunities

Uncertainties & Barriers

- Cause, risk factors, and true prevalence remain unclear.
- No nonsurgical diagnostic method exists.

Treatment Challenges & Opportunities

- Hysterectomy & hormonal treatments can impact fertility.
- Increases risk of ovarian cancer & chronic pain conditions (e.g., IBS).
- More research needed on fertility-preserving treatments & pathophysiology.



Polycystic Ovary Syndrome (PCOS): Gaps & Opportunities

Health Impacts

- Most common **endocrine disorder in women** and a leading cause of infertility.
- Linked to CVD, Type 2 diabetes, fatty liver disease, endometrial hyperplasia, and cancer, often influenced by body fat levels.

Key Research Opportunities

- No cure & no FDA-approved therapies.
- Need to explore genetic, epigenetic, and environmental factors.
- Assess long-term cardiovascular, metabolic, and cognitive risks.
- Develop mitigation & curative strategies.

Mental Health & Women's Hormones: Gaps & Insights

Hormonal Influence on the Brain

- Estrogen receptors are widespread in neuronal & non-neuronal brain cells (e.g., microglia, astrocytes).
- **Rodent models** show ovarian steroids affect brain activity & behaviors (e.g., feeding, mating, maternal instincts).

Key Research Opportunity

• Unclear why hormonal fluctuations contribute to female-specific affective disorders across life stages.



Pubertal Depression: Gaps & Insights

Increased Risk in Women

• Depression risk rises at **mid-puberty** and persists throughout reproductive years.

Key Research Opportunities

- Ovarian steroids may play a role, but findings are mostly correlational.
- Few preclinical models exist to study neuroendocrine mechanisms.



Premenstrual Dysphoric Disorder (PMDD): Gaps & Insights

Impact of Hormonal Changes

- Can trigger **mood & behavior changes** (e.g., impulsivity, irritability, anxiety, sadness).
- Sex steroids alter gene expression & brain blood flow, contributing to symptoms.

Key Research Opportunities

- Why some women experience epigenetic changes from estradiol & progesterone is unknown.
- Need for better diagnosis & clinical management.
- PMDD excludes cases of premenstrual exacerbation of chronic depression, despite similar symptom severity.



Perinatal Depression (PND): Research Opportunities

What It Is

• A major depressive disorder occurring **during pregnancy or within 3 months postpartum**.

Key Research Opportunity

- Research on the **complex & multifactorial causes** to identify clear biological pathways.
- Identify ways to **prevent** PND and **increase access** to existing treatments.



Menopause and Cognition: Research Opportunities

Cognitive Changes During Menopause:

- Many women experience memory lapses, difficulty concentrating, and "brain fog" during menopause.
- These cognitive changes can affect daily functioning and overall well-being.

Research Gaps and Opportunities:

- The biological mechanisms linking menopause to cognitive decline are not fully understood.
- Historically, women have been underrepresented in cognitive health research, leading to gaps in knowledge.
- Promote studies aimed at developing strategies to mitigate cognitive decline during menopause.



Expanding, Training, Supporting, and Retaining the Women's Health Research Workforce



NIH Workforce Programs in Women's Health Research

Building Interdisciplinary Research Careers in Women's Health (BIRCWH)

- Objective: Trains early-career faculty to develop research skills in women's health & sex differences.
- Key Benefits:
 - Provides protected time for research, writing, and securing peer-reviewed funding.
 - Encourages collaboration across disciplines to advance women's health research.
 - Supports career development through mentorship & networking.

Women's Reproductive Health Research (WRHR)

- Objective: Enhances research capabilities of newly trained OB/GYNs.
- Key Benefits:
 - Offers state-of-the-art education & hands-on experience in reproductive health research.
 - Covers basic science, translational, and clinical research.
 - Prepares researchers for independent funding & leadership roles in women's health.

NIH Workforce Programs in Women's Health Research

Research Scientist Development Program (RSDP)

- **Objective**: Trains **reproductive physician-scientists** in cutting-edge **cell & molecular technologies** to address key issues in obstetrics and gynecology.
- Key Benefits:
 - Focus on **basic science skill development** for early-career faculty.
 - Provides mentored research opportunities to advance independent careers.
 - Encourages innovation in reproductive health research.

Specialized Centers of Research Excellence (SCORE) on Sex Differences

- Objective: NIH-funded national research hubs for sex and gender studies.
- Key Benefits:
 - Facilitates collaboration between academia, private industry, & federal agencies.
 - Enhances research on **biological sex differences** in women's health.
 - Supports multidisciplinary & translational research to address complex health disparities.

Conclusions & Future Directions

Key Gaps in Women's Health Research

- Limited understanding of basic female physiology.
- Understudied conditions that affect women disproportionately or differently than men.

Opportunities for Advancement

- Research can drive better prevention, diagnosis, & treatment.
- Potential breakthroughs will benefit both women's health & society overall.

The Role of Workforce Programs

- Programs like **BIRCWH**, **SCORE**, **WRHR**, **& RSDP** have successfully supported women's health researchers.
- NIH should expand initiatives to further prioritize women's health research.



To access the report and supporting materials, visit

www.nationalacademies.org/womens-health-research

For more information, contact:

Amy Geller, Study Director WomensHealthResearch@nas.edu NATIONAL ACADEMIES Medicine

A New Vision for Women's Health Research

Transformative Change at the National Institutes of Health





Backup Slides



The Committee's Recommendation on Women's Health Research Workforce Programs

NIH should augment existing programs and develop new grant initiatives specifically designed to promote interdisciplinary science and career development in areas related to women's health. NIH should:

- Expand the **Building Interdisciplinary Research Careers in Women's Health (BIRCWH)** program to 40 centers over 5 years; increase funding to \$1.5 million annually per center,
- Expand the **Specialized Centers of Research Excellence (SCORE) on Sex Differences** to 17 centers over the next 5 years; increase funding to \$2.5 million annually per center,
- Fund additional **multi-project program grants**, with or without built-in training components, that focus on women's health research (e.g., P and U grants),
- Expand the **Women's Reproductive Health Research (WRHR)** program to 20 centers over 2 years; increase funding to \$500,000 annually per center, and
- Expand the **Research Scientist Development Program (RSDP)** to support 10 scholars with full support for 5 years at \$1.25 million annually.

