

AMERICAN MEDICAL ASSOCIATION WOMEN PHYSICIANS SECTION

Resolution XXX (Assigned by HOD)  
(I-24)

Introduced by: Laurie Lapp, Kylie Ruprecht, Angela Hsu, Sidra Jabeen, Sara Kazyak

Subject: Advancing Menopause Research and Care

Referred to: Reference Committee (Assigned by HOD)

1 Whereas, roughly 75 million people are currently in perimenopause, menopause, or  
2 postmenopause in United States, with 6000 new people entering menopause every day<sup>1</sup>; and  
3

4 Whereas, menopausal and postmenopausal persons face increased health risks, such as  
5 cardiovascular disease, osteoporosis, urinary incontinence, and mood disorders, due to the  
6 hormonal changes that occur during this period<sup>2</sup>; and  
7

8 Whereas, economic costs associated with menopause and postmenopause are substantial, with  
9 an annual burden of \$1.8 billion from lost work time and \$26.6 billion in medical expenses<sup>3</sup>; and  
10

11 Whereas, when surveyed, only about 30% of OBGYN program directors reported having a  
12 menopause curriculum for their residents and 80% of OBGYN residents do not feel prepared to  
13 talk to their patients about menopause<sup>1,4</sup>; and  
14

15 Whereas, there is a severe need for additional research on menopause, and an expert panel  
16 noted there are several existing knowledge gaps regarding menopause, including pathogenesis  
17 and treatment of vasomotor symptoms, which has been shown to disproportionately affect  
18 women of color<sup>5,6</sup>; and  
19

20 Whereas, menopause, similar to other aspects of women's health, is underfunded and lacks the  
21 appropriate infrastructure for tracking funding, such as the NIH assigned RCDC number<sup>7</sup>; and  
22

23 Whereas, in 2023, it was estimated that menopause, which impacts nearly 50% of the  
24 population, received \$259 million dollars for research in comparison to Alzheimer's, which  
25 affects approximately 10.9% of individuals 65 and older, received \$4 billion dollars<sup>8,9</sup>; and  
26

27 Whereas, on March 18, 2024, President Biden signed an executive order to support and  
28 advance women's health focusing on increasing investments in women's health research by the  
29 NIH, including establishment of a Pathways to Prevention for menopause and menopausal  
30 symptoms by the NIH to improve women's health across the lifespan, which highlights the need  
31 for ongoing advocacy and research in this area<sup>10</sup>; and  
32

33 Whereas, in the last year, multiple bills have been introduced in Congress calling for expanded  
34 access to menopause care and funding for menopause research, including S.4246 - Advancing  
35 Menopause Care and Mid-Life Women's Health Act, H.R. 6749 - Menopause Research and  
36 Equity Act of 2023; H.R. 8347 - Improving Menopause Care for Veterans Act of 2024<sup>11-13</sup>; and  
37

38 Whereas, the AMA has not sent any federal or state correspondence regarding menopause-  
39 related advocacy since at least 2015<sup>14</sup>; therefore be it  
40  
41 RESOLVED, that our AMA advocate for increased funding for biomedical and public health  
42 research on perimenopause, menopause, and related chronic conditions; and be it further  
43  
44 RESOLVED, that our AMA support expanded training opportunities for medical students,  
45 residents, and other health professions trainees to improve care, treatment, and management  
46 services for perimenopause, menopause, and related chronic conditions; and be it further  
47  
48 RESOLVED, that our AMA support efforts to increase awareness and education related to  
49 menopause, mid-life women's health and related conditions, treatment, and preventative  
50 services.

Fiscal Note: Assigned by HOD

Date Received: XX/XX/2024

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## **RELEVANT AMA POLICY**

### **Sex and Gender Differences in Medical Research H-525.988**

Our AMA:

- (1) reaffirms that gender and sex exclusion in broad medical studies questions the validity of the studies' impact on the health care of society at large;
- (2) affirms the need to include people of all sexes and gender identities and expressions in studies that involve the health of society at large and publicize its policies;
- (3) supports increased funding into areas of women's health and sexual and gender minority health research;
- (4) supports increased research on women's health and sexual and gender minority health and the participation of women and sexual and gender minority communities in clinical trials, the results of which will permit development of evidence-based prevention and treatment strategies for all women and sexual and gender minority individuals from diverse cultural and ethnic groups, geographic locations, and socioeconomic status;
- (5) recommends that all medical/scientific journal editors require, where appropriate, a sex-based and gender-based analysis of data, even if such comparisons are negative; and
- (6) recommends that medical and scientific journals diversify their review processes to better represent women and sexual and gender minority individuals;
- (7) supports the FDA's requirement of actionable clinical trial diversity action plans from drug and device sponsors that include women and sexual and gender minority populations;
- (8) supports the FDA's efforts in conditioning drug and device approvals on post-marketing studies which evaluate the efficacy and safety of those products in women and sexual and gender minority populations when those groups were not adequately represented in clinical trials; and
- (9) supports and encourages the National Institutes of Health and other grant-making entities to fund post-market research investigating pharmacodynamics and pharmacokinetics for generic drugs that did not adequately enroll women and sexual and gender minority populations in their clinical trials, prioritizing instances when those populations represent a significant portion of patients or reported adverse drug events.

### **An Expanded Definition of Women's Health H-525.976**

Our AMA recognizes the term "women's health" as inclusive of all health conditions for which there is evidence that women's risks, presentations, and/or responses to treatments are different from those of men, and encourages that evidence-based information regarding the impact of sex and gender be incorporated into medical practice, research, and training.

### **Encouraging Research of Testosterone and Pharmacological Therapies for Post-Menopausal Individuals with Decreased Libido H-460.886**

Our American Medical Association encourages expansion of research on the use of testosterone therapy and other pharmacological interventions in treatment of decreased libido in postmenopausal individuals.