SWISS GENDER MEDICINE
SYMPOSIUM

Press release, November 17, 2026

Toward more precise medicine

Biological sex and social gender factors influence health and disease. Yet knowledge gaps remain, and existing findings are not applied enough in practice. The Swiss Gender Medicine Symposium showed what role research, education and politics play in this.



In the operating room, collaboration is not an option but a prerequisite: a procedure only succeeds when anesthesia, surgery and nursing work hand in hand. With this image, Professor Beatrice Beck Schimmer, Director of University Medicine Zurich, opened the second Swiss Gender Medicine Symposium on October 26 and 27 in Bern. Her message: gender medicine, too, only has an impact when research, clinical practice, industry, politics and education act together.

The symposium focused on exactly these different levels. Speakers from various countries showed where gender medicine stands today in basic research and clinical care, what role research funding and industry play, and how political and social developments influence its progress. It became clear that the question is no longer *whether* sex and gender matter in medicine, but *how* they are consistently taken into account.

Around 370 professionals from research, healthcare, industry and politics attended the symposium, which was moderated by SRF journalist Michael Rauchenstein. This is a sign of the great interest in gender medicine. The international participation and the strong presence of early-career researchers were striking. The poster presentations showed the thematic diversity of the research field: around 100 posters were accepted for presentation, and 14 of them were selected for the Poster Award Competition. The two-day program comprised numerous talks, keynotes and panel sessions. The following contributions are examples of the variety of topics and perspectives.

Gender medicine as a mark of quality

Berlin cardiologist Vera Regitz-Zagrosek, one of the defining voices of the field, put it unmistakably: "Gender medicine is not a special discipline for women, but a mark of quality of precise medicine." For sex and gender to be considered as a matter of course in diagnostics, therapy and research, a cultural change is needed, in professional societies and education as well as in research funding and clinical routine. Many clinical studies

are still not designed or large enough to reliably examine sex-related differences. In addition, existing findings do not always find their way into guidelines.

Cardiologist Noel Bairey Merz of the Cedars-Sinai Medical Center showed how research on women's heart health can be implemented in a specialized care program. One example is dysfunction of the small heart vessels, which can cause symptoms even without narrowing of the large coronary arteries.

Ivana Jaric, head of the Neuroendocrinology research group at the Institute of Laboratory Animal Science at UZH, built on this clinical perspective. In basic research, she said, biological sex has been neglected in cell and animal models for decades. To this day, the sex of cells is often not recorded, and male animal models dominate in many disciplines. Although female and male animals are now included in studies more often, biological sex is not always considered in the analysis.

Where research misses reality

Economist Marc Lerchenmüller of the University of Mannheim described another blind spot. His analysis of global data shows that medical research is oriented more toward diseases with high mortality than toward those with a high burden of disease. This has consequences for women: worldwide, men die early more often, whereas women spend more years of life with illness and disability. As a result, conditions that disproportionately affect women, such as chronic pain or musculoskeletal disorders, remain insufficiently researched.

But even existing knowledge does not automatically find its way into care. Nguyen, CEO and founder of the start-up EQUAL CARE, described the gap between evidence and everyday clinical practice. Her company structures publicly available clinical information on sex-specific differences and makes it systematically accessible. The aim is to make existing evidence easier to use in research, medical practice and digital applications.

Research is also political

Ffion Storer Jones turned the focus to the political framework. As deputy head of EU advocacy at the global health organization DSW in Brussels, she warned against taking progress in gender medicine for granted. Anti-gender movements are calling gender-sensitive research into question, while rules and funding are being negotiated in Brussels. Whether gender medicine prevails therefore depends not only on scientific evidence, but equally on attention, resources and political backing.

Bettina Balmer also sees a need for action in Swiss politics. The National Councillor, pediatric surgeon and President of FDP Women Switzerland reported that for some members of parliament, the term "gender" alone meets with rejection. To convey the issue better, she therefore speaks of individualized or precise medicine.

From guideline to practice

Finally, Shirin Heidari showed how long the road from insight to implementation can be. The Executive Director of GENDRO and Senior Researcher at the Geneva Graduate Institute looked back on ten years of the SAGER Guidelines. Published in 2016, the guidelines are intended to help ensure that sex and gender are appropriately considered and transparently reported in scientific work. What initially met with resistance is now widely recognized internationally, among others by the WHO and the Committee on Publication Ethics (COPE), an international organization for standards in scientific publishing.

But broad recognition does not yet mean consistent implementation. Sex and gender, Heidari emphasized, must be considered from the very beginning and throughout the entire research process, not only when writing a publication.

This brought the symposium full circle to the image from the operating room. "We must close existing knowledge gaps and at the same time ensure that existing findings already reach patients today. This can only succeed if research, clinical practice, education and politics act together," says Carolin Lerchenmüller, Professor of Gender Medicine at the University of Zurich and Chair of the Program Committee of the Swiss Gender Medicine Symposium.

This year's Poster Awards went to:

Dr. James Cleland – "Sex-specific regulatory and metabolic architecture of liver zonation"
Aritz Lizoain - "Menstrual cycle-dependent variation in insulin sensitivity in type 1 diabetes using real-world data"
Staria J., MSc - "Gender Inequities in Healthcare Access Among Individuals with Chronic Spinal Cord Injury: Evidence from 32 Countries"

Swiss Gender Medicine Symposium 2027

The third Swiss Gender Medicine Symposium will take place on October 18 and 19, 2027, again at the Kursaal Bern.

About the Swiss Gender Medicine Symposium
The Swiss Gender Medicine Symposium is organized under the leadership of the University of Zurich (UZH), in cooperation with the five medical faculties of Switzerland and with project support from foundations and industry.

The preparation of the symposium is based at University Medicine Zurich (UMZH) of the University of Zurich and led by **Prof. Beatrice Beck Schimmer**.
Prof. Beatrice Beck Schimmer is Professor of Anesthesiology at UZH and has been Director of University Medicine Zurich since 2018, making her a member of the seven-person Executive Board of the University of Zurich.

www.swiss-gendermedicine.org

Contact Swiss Gender Medicine Symposium
info@swiss-gendermedicine.org