Twitter Thread by Erin C. Sanders, MSN, WHNP-BC (She/Her/Hers)

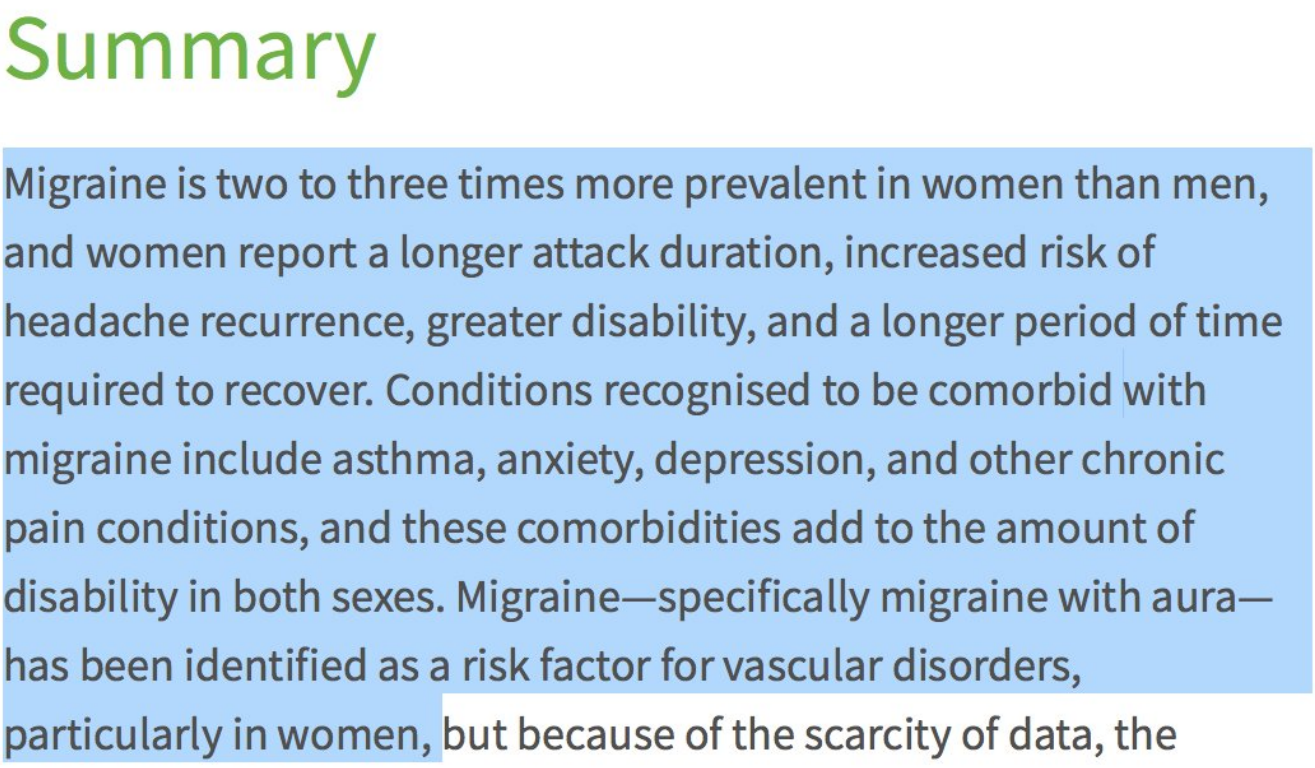
Erin C. Sanders, MSN, WHNP-BC (She/Her/Hers)
@ErinSandersNP

THREAD: Women and "Unexplained" Diseases

It's interesting that even a condition as common as #Migraine is still not well understood.

Significant overlap with many other conditions mostly impacting women that are also "not well understood" is present.

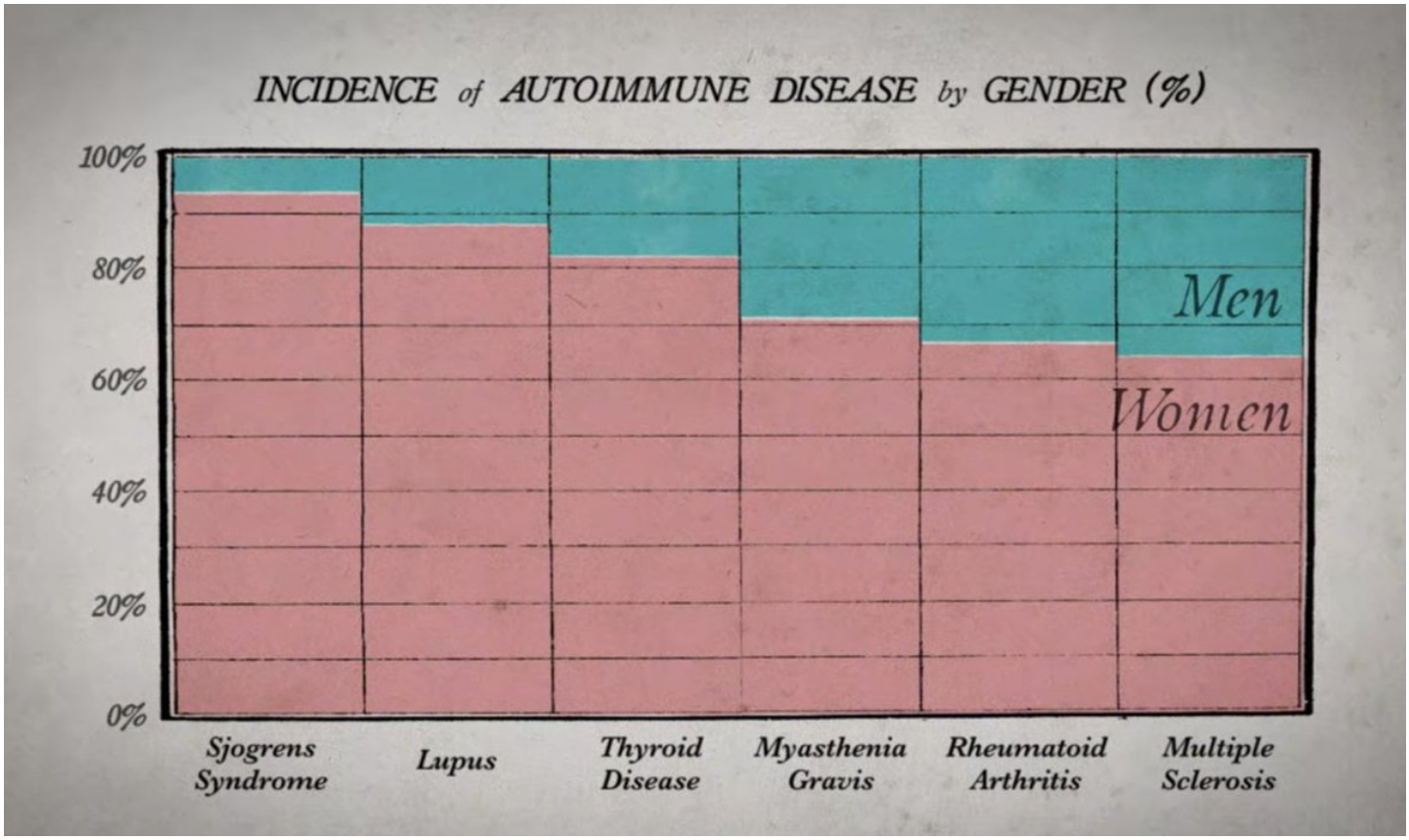
https://t.co/EhrnxfItsm https://t.co/R7QUKrZvhR



Summary

Migraine is two to three times more prevalent in women than men, and women report a longer attack duration, increased risk of headache recurrence, greater disability, and a longer period of time required to recover. Conditions recognised to be comorbid with migraine include asthma, anxiety, depression, and other chronic pain conditions, and these comorbidities add to the amount of disability in both sexes. Migraine—specifically migraine with aura—has been identified as a risk factor for vascular disorders, particularly in women, but because of the scarcity of data, the

2/ As a women's health clinician & #COVID researcher I know ME/CFS, #LongCOVID & most autoimmune diseases disproportionately impact women after puberty. Female preponderance has likely contributed to the historical neglect of funding & subsequent lack of interest in studying them



3/ Paradoxically, the ongoing dismissal of many of women's symptoms and abuse by the medical system is a direct result of our lack of understanding & ongoing LACK of funding.
cc: @jenbrea @ahandvanish @AthenaAkrami @Dr2NisreenAlwan @MBVanElzakker
https://t.co/ITrLBkc3uE

> If you work on #longCOVID and say \u201cI\u2019m not an #MECFS expert, I don\u2019t know anything about it, it\u2019s not my job to know about ME or \u2019fatigue\u2019\u201d then you really, REALLY need to learn about ME. This is what MANY infections can do, not just SARS2. pic.twitter.com/zke0MqwrEd
>
> — Jennifer Brea\U0001f992 (@jenbrea) January 14, 2021

4/ This pattern of ignorance/lack of understanding and dismissal, further perpetuates the trauma women suffering from chronic illness must endure. @ahandvanish @AthenaAkrami @jenbrea @RanaAwdish @VirusesImmunity @angie_rasmussen

Example stats ME/CFS:
https://t.co/GKQqqtWTI7

> In ME/CFS is about 80/20 female/male. Before puberty, gender ratio is 50/50. Many anecdotal reports of trans people who take hormones: F to M improve, M to F experience worsening symptoms. Female preponderance is found in both sporadic cases and historically, in outbreaks.
>
> — Jennifer Brea\U0001f992 (@jenbrea) January 12, 2021

5/ Or Functional Neurologic Disorder (FND) aka Conversion Disorder, Hysteria, or Psychogenic Non-Epileptic Seizures (PNES).

Majority of patients with PNES are women, outnumbering men by a ratio of 3:1. Female sex preponderance occurs after puberty & usually before the age of 55

6/ You don't have to look far. Patient's are SMART. Many patients are also clinicians and scientists.

Lack of data does not equal lack of EXISTENCE of a problem, it equals lack of UNDERSTANDING of the problem.

And this problem is immense.
https://t.co/TnF2j4dKs3

> Like this tweet if:
>
> - You are a woman
>
> - You have ever been ignored, gaslit, accused of exaggerating or told its all in your head by a doctor when you sought help for a medical problem
>
> I just wanna see something.
>
> — Dr. Jessica Taylor (@DrJessTaylor) January 13, 2021

7/ The intersection of sex hormones and immunobiology has never been more important for us to understand.

My optimistic hope is that the enormous amounts of funding for #COVID19 open doors to understanding pathophysiology of previously neglected diseases particularly in women.

8/ Paternalism, sexism & racism are baked into medicine, medical training, and a broken healthcare system.

But our scientific ignorance should not be wielded to blame & further abuse patients.

Our lack of understanding is not their failure but ours.

https://t.co/LwN8qc0Q4a

> Well, it would be so much easier if we didn\u2019t continuously \u201ccarve diagnoses out of the psychosomatic wastebasket\u201d as Maya Dusenbury so eloquently wrote in her book Doing Harm. So I will continue to rant about it. Wont make the medical profession happy, but time to face reality... pic.twitter.com/iFJudV9BLX
>
> — GinaMcGalliard \U0001f9dc\U0001f3fb\u200d\u2640\ufe0f\U0001f315\U0001f339 (@GinaMcGalliard) January 12, 2021

9/ And while we're at it, could we just abandon certain medical terms like: "incompetent cervix" and "irritable uterus"...

There are more specific, more scientific, and less offensive terminology we can use for women's bodies.

@VirusesImmunity @angie_rasmussen @DocElovitz

10/ @threadreaderapp please unroll

To read more of my Threads, please check out: https://t.co/UMdZvE2tDj