

SIHO-Speech EN :

I greet you all gathered here today as a doctor and as a junior SIHO member.

Why are we here? To finally bring about a real discussion regarding the link between women's health and iron in the human body.

In a world where there are still women who are ostracised and treated as aliens because of their menses, and where millions of women have no access to sanitary towels and tampons, Switzerland would have the opportunity to give an extremely important international signal. Namely to equate women and men in terms of iron, in spite of women's menses. Anyone who denies the role of menstruation in this context is probably living on another planet, because it isn't by chance that the levels of ferritin in post-menopausal women begin to slowly converge to the same values as men. It's also known that both children in their growth spurts and heart failure patients benefit significantly from iron infusion therapy.

We women are expected to perform well in every situation, be it during our studies, at work or in private life ... but with the clear message that if we want to achieve equality with men, we must be much better at everything than them. In a similar manner, we are led to believe, without any scientific evidence, that our female cells would need less iron than male ones to function normally!? To give you clear figures: we are referring to ferritin values that are 7 to 10 times lower!!

Is it any wonder that sometimes our performance is not at the level of men, because our doctors are ignorant of our actual iron needs and therefore we are always kept back? Real inequalities exist amongst the standard values, which simply cannot be considered as carved in stone, but must be revised. These erroneous values are not only disseminated here in Switzerland, but are widespread – including on an international level – by authorities in health care such as the World Health Organisation, with its headquarters right here in Switzerland, who dare to mention such values as 15 ng/mL, declared as normal for women, while men have values between 100 and 200.

How did one ever come to such absurdly low normal values?? Only by ignorance of the subject matter. Iron deficiency is classified into levels, that one reaches *before* the stage of anaemia, which is the final stage of serious iron deficiency, in which a lack of red blood cells occurs. The so-called norm values were collected from a group of women without anaemia. Nobody was interested to know whether these women suffered from symptoms of iron deficiency syndrome. And now these so-called norm values, are used against us women without any scientific proof that our cells would need less iron than men's.

And now, I address our Federal Councillor Mr Berset, as in 2015 you asked the BAG to launch an investigation into the effectiveness and efficiency of iron infusion therapy, which nonetheless helps so many women in their problems with iron deficiency. Obviously, you want to massively reduce access to this treatment by restricting the insurance coverage, because according to your counsellors, this treatment is simply not effective.

Dear Federal Councillor, you know, just as we do, that the placebo-controlled double-blind study, which could prove the effectiveness as well as the profitability of the therapy, has still not been done. You also know that the implementation of such a study in Switzerland would face major obstacles, as women who have an urgent need for iron are unwilling to take the risk of falling into the placebo branch of the study. Thus, the validity of such a study that includes almost only "healthy" women is totally obsolete. It is true that we women here in Switzerland know what we need. But your department shows no interest, even if there is clear evidence that this treatment is efficient. Iron tablets are often not enough to resolve these deficiencies, as well as often being associated with unpleasant side effects. Your advisors in the BAG allow scientifically unproven opinions to be published, that state that the oral iron therapy is equal to the intravenous iron treatment. An assertion that, according to experience, is true only in a very small proportion of patients, but leaves the majority of the patients outside in the rain.

So far, the BAG has clearly shown that it's impossible to assess the efficacy of iron treatment in a scientifically correct way without having a study of statistical relevance. They want to make us believe that in our incredibly rich country, cost considerations mean that iron therapy cannot be financed. Pseudo-scientific proof is brought forward and finally, only the economic aspect of a long-established therapy is considered and the aspect of effectiveness is simply left aside.

Dear Madam Federal Councillors and Dear Federal Councillors. Is this what is referred to as social policy here? Switzerland's health system was once considered as one of the best in the world. No more! Now we have to accept that in this beautiful country, with incredible financial resources, one tries to generate savings on the backs of women. This is an unacceptable state of affairs and it will not go unnoticed neither here amongst our population, nor in other countries further afar.

Thank you for listening!