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■ Editorial

Women's Health and Primary Care

Seung-Won Oh[1,2,*]

[1]Department of Family Medicine, Seoul National University College of Medicine, Seoul, Korea
[2]Healthcare System Gangnam Center, Seoul National University Hospital, Seoul, Korea

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Health is a fundamental aspect of our lives and applies universally regardless of gender, age, or socioeconomic background. However, factors influencing health differ based on sex and gender.[1)] These variances extend beyond biological reproductive organs to include attitudes towards sexual activity, the challenges of pregnancy, and childbirth. Chronic diseases common to men and women differ in their life cycles and pathogenesis depending on sex. In societal contexts, women often shoulder a greater familial burden, particularly in child-rearing responsibilities, despite positive shifts in women's social status and roles. Nonetheless, unfriendly childbirth and child-rearing environments, gender inequality, labor market structures, male-centered family cultures, and societal institutions persist as factors that disproportionately burden women.

While women generally have a longer lifespan than men, their subjective health levels are often lower.[2)] This discrepancy may stem from biological differences, factors significantly impacting health (e.g., physical activity), or social structural elements imposing additional burdens on women.[3)] Future studies should explore these factors to better understand gender health disparities.

This issue features three papers concerning women's health. Kunasagran et al.[4)] provide a comprehensive review of global domestic violence during the coronavirus disease 2019 pandemic, highlighting its impact on women's and children's health. The paper underscores the need for an understanding of barriers that prevent victims from seeking help and emphasizes the crucial role of healthcare workers and policymakers in reducing pervasive domestic violence.

Shalak et al.[5)] examine the repercussions of violence experienced by women in war-affected areas on their reproductive health. The review reveals the severe threats to women's health in countries which frequently experience civil wars, such as those in Africa and the Middle East. Given the ongoing conflicts in Ukraine and Israel, this paper holds significant implications for current events. Through qualitative studies, Sukeri et al.[6)] investigate the factors influencing contraception decisions of human immunodeficiency virus (HIV)-infected women. The paper highlights the diverse socio-cultural and religious factors shaping the thoughts of HIV-infected women on pregnancy and childbirth. It stresses the importance of considering patients' value judgments when applying medical principles.

As primary care embodies comprehensiveness, longitudinality, and coordination, it can play a central role in supporting women throughout their lives. Primary care physicians should focus on establishing prevention and treatment strategies for women's overall health, including contraception, pregnancy, childbirth, and menopause management.[7-9)] Throughout this process, the socio-cultural environment affecting women's health should also be carefully considered.

CONFLICT OF INTEREST

No potential conflict of interest relevant to this article was reported.

ORCID

Seung-Won Oh: https://orcid.org/0000-0003-3800-0754

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*Corresponding Author: **Seung-Won Oh** https://orcid.org/0000-0003-3800-0754
Tel: +82-2-2112-5643, Fax: +82-2-2112-5635, E-mail: sw.oh@snu.ac.kr

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