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## Gender Bias in Obstetrics and Gynecology Mahmood SU\*, **Health Care System**

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### **Dear Editor**

Obstetrics is a field of medicine that deals with pregnancy, childbirth and postpartum periods while Gynecology deals with health of female reproductive system and the breast. As the field deals with female reproductive organs, gender bias is inevitable during routine clinical practice hence it is important to be aware of the issues of gender equity that continues to be prevalent globally.

The specialty of obstetrics and gynecology (OB/GYN) shows significant gender redistribution as women constitute 81% of the obstetrics and gynecology (OB/GYN) resident population [1]. There is an increasing opinion among patients, doctors, and the general population that women are more qualified to be gynecologist and obstetricians because only women can experience the issues faced by other women. From this viewpoint, women make better obstetrics and gynecology (OB/GYN) doctors than men by virtue of their gender alone [2].

Women have an inherent advantage because of experience and exposure to physiological processes such as the menstrual cycle and reproduction through life. With regards to the advantages female professionals have in this field, naturally they score better on the test and exams conducted. Patients interact more freely and openly with another female not only because they feel that this way their doctor can empathize with them but also because of societal and religious norms and traditions. Menses and contraception are taboo topics in a lot of societies and women only feel comfortable discussing their intimate matters with other women. We can't expect the patient to submit, the patient reserves the right to demand another doctor if they feel uncomfortable or unsafe. The female patient may feel vulnerable while exposing herself to a male doctor and this cannot be changed instantaneously, what can be slowly changed is the general public's perception of male gynecology students and doctors and provide a safe and free environment for the patient. But people's reactions cannot be anticipated or gauged correctly in such situations. It is the cultural expectations from both genders that may be influencing the assessment of their clinical performance.

Many studies suggest that male medical students experience gender

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bias from patients in the obstetrics and gynecology (OB/GYN) ward. Male students also felt socially excluded from female-dominated clinical groups [3]. The female patients straightforwardly refuse to let male students observe their procedures but also reserved details during history and are hesitant for letting a male student examine them. This resulted in a decreased interest in the clerkship and also affects the choice of any male student when choosing residencies. Quickly and easily understanding basic concepts of most gynecological and obstetric issues results is a peak in interest in female students and the patient's preference over male students also boosts confidence.

Lastly, we suggest that, Obstetrics and gynecology (OB/GYN) instructors need to encourage and persuade patients to accept medical student participation regardless of gender. Obstetrics and gynecology faculty needs to be vigilant for minute gender bias observed in everyday practice and should make sure that equal participation for both male and female medical students occurs in routine practice [4].

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