bsi.

Women's Health and Technology

How we can better serve women's bodies while making excellence a habit.















Standards and schemes for certification



Aviation, Space and Defense >

AS9100, 9110, 9120

Automotive >

IATF 16949:2016 (formerly ISO/TS 16949)

Business Continuity >

ISO 22301

Cloud Security >

STAR

Energy Management >

ISO 50001

Environmental Management >

ISO 14001

Food and Drink >

ISO/FSSC 22000, HACCP

Health and Safety >

ISO 45001

Information Security >

ISO/IEC 27001

Medical Devices >

ISO 13485

Quality Management >

ISO 9001

Risk Management >

BS ISO 31000

Service Management >

ISO/IEC 20000

Telecoms >

TL 9000

Testing Inclusivity Novel Sex Specific Treatments Digital Standards Involving Female Opinions @izzygrandic

Scientifically, Women != Men

Women are 4X more likely to get Multiple Sclerosis

Alzheimer's patients are women

80% of people with osteoporosis are women.

Women are 2X more likely to have asthma

Female athletes are 2X more likely to damage their ACL

Adrenal cancer is 3X more prevalent in women than men

Women get diagnosed with diseases 4 years later than men with the same disease

Women are represented in <20% of clinical trials

50% of women don't get the correct heart failure treatment

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$$A + B + C + D + E + F = Disease$$

(Factors in the body)

$$A + B + C + D + E + F = Lack of Disease$$

(Factors in the body)

Different factors can mean different outcomes

$$1+2+3=6$$

 $7+3=10$

Different factors can also mean same outcomes.

$$1+2+3+4=10$$

 $7+3=10$

Different factors can also mean same outcomes.

But the root causes of the outcome are not the same.

$$1+2+3+4=10$$

 $7+3=10$

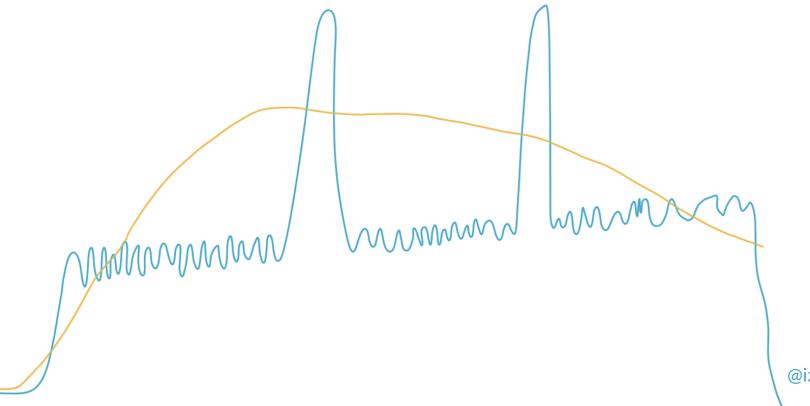
$$A + B + C + D + E + F$$

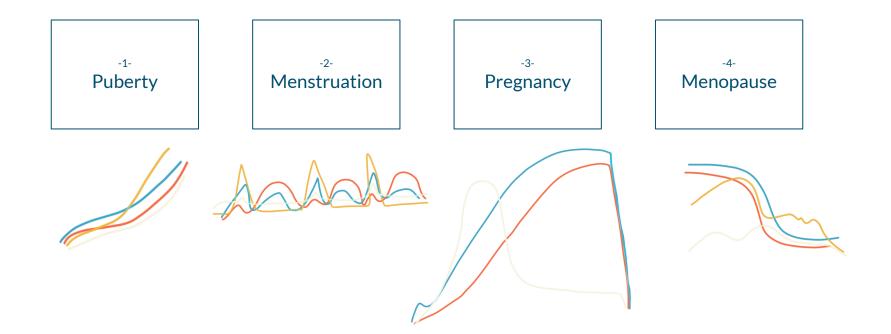
 $Z + Y + X + W + V + U$

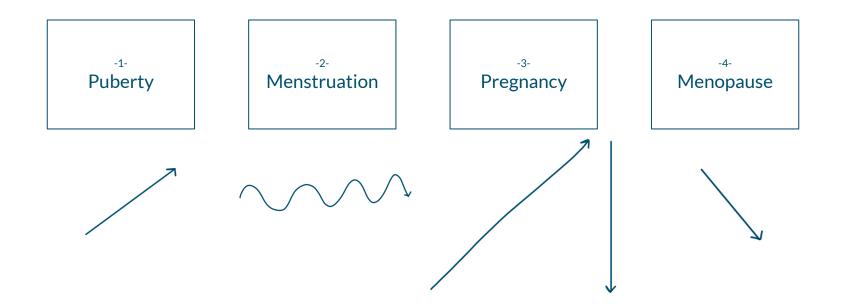
Women and men have different factors.

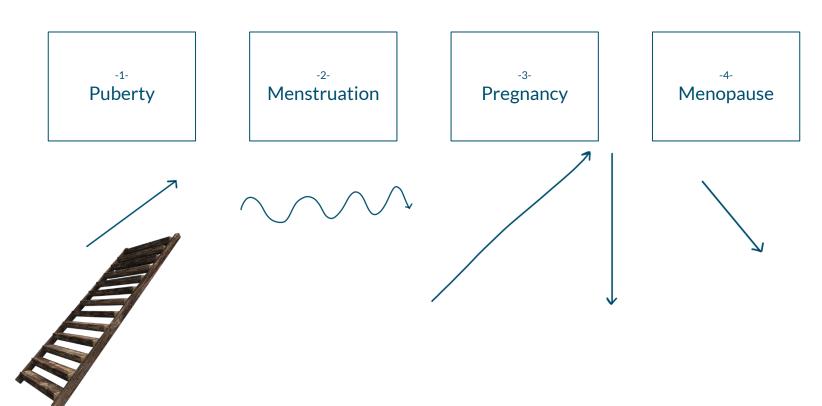
Average Hormonal fluctuations over a lifetime.

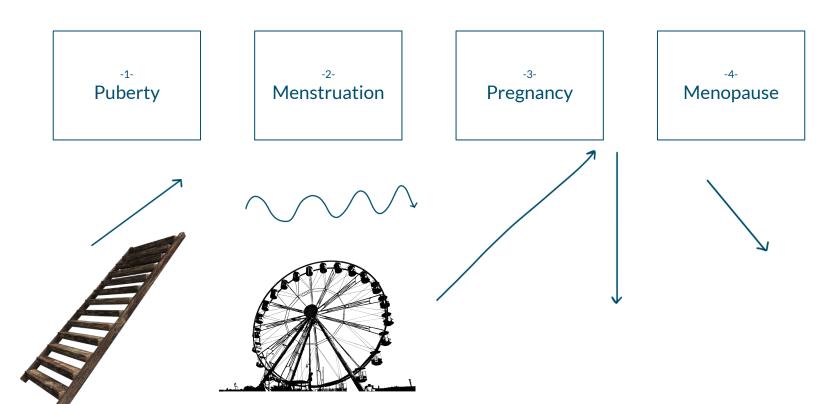












-2--3--1-Puberty Menopause Menstruation Pregnancy

-2--3--1-Puberty Menopause Menstruation Pregnancy @izzygrandic Female bodies and male bodies are different, but we should give them equal opportunities + treatments.

What's stopping us?

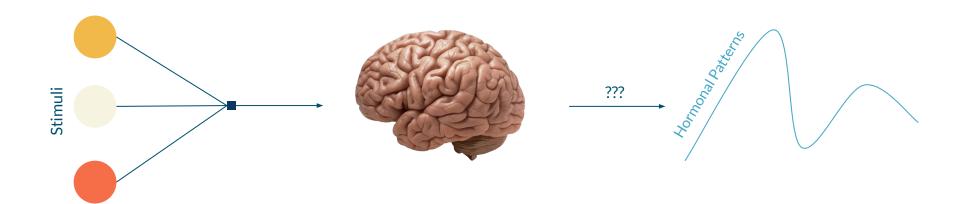
We don't have a body of excellence.

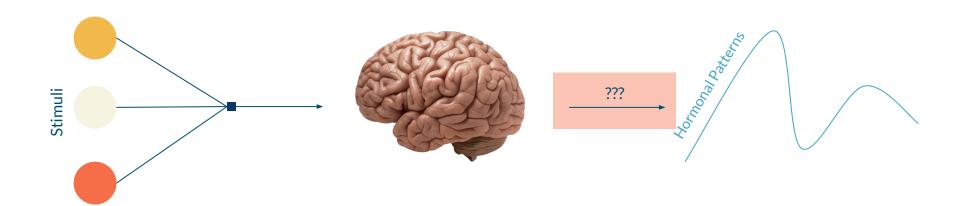
-1We don't **know** enough.

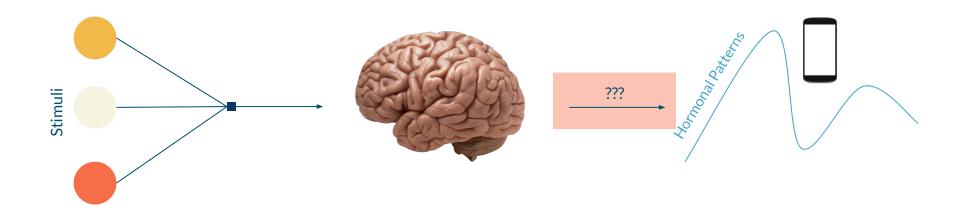
4% of global health research is female-specific.

-2-We don't **distribute** our current solutions.

What we don't know:







We don't understand their correlations to diseases.

We don't understand how to identify their imbalance.

We don't understand how they impact our moods.

We don't understand their correlations to diseases.

We don't understand how to identify their imbalance.

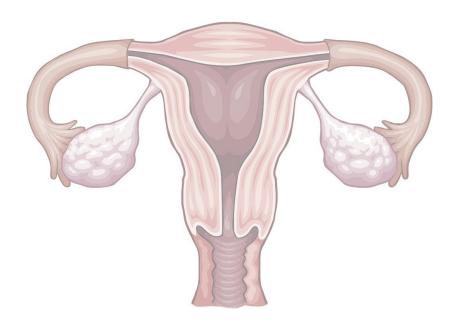
Increased disease risk We don't understand how they **impact our moods**. Hot Flashes Diabetes Osteoporosis Cancer Memory loss Sexual dysfunction Depression It's a long list 😟

Reduced cognitive function

Urinary incontinence

Urogenital atrophy

Female-specific diseases



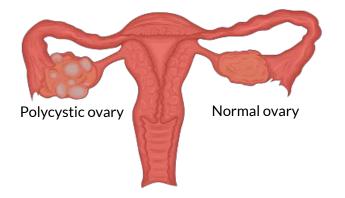


2 Treating

Female-specific diseases

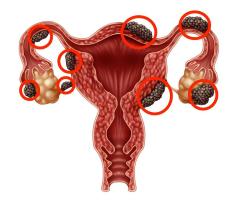


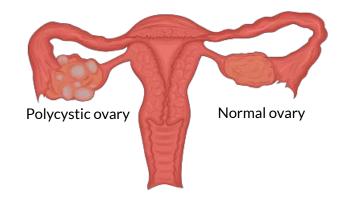




10% of women have polycystic ovarian syndrome

Female-specific diseases





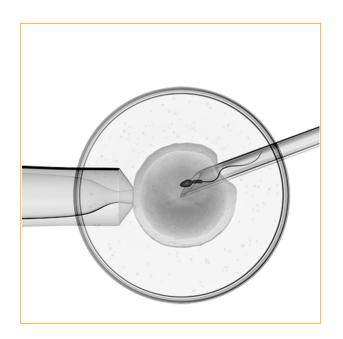
11% of women have endometriosis

10% of women have polycystic ovarian syndrome

And we have no cures.

The science of [contra/con]ception





That's only 3 examples.

What we don't distribute:



Period Poverty





Maternal Mortality

1990

1995

2000

2005

2010

2015

Number of maternal deaths, 1990 to 2015 Number of maternal deaths by region, 1990 to 2015 Our World in Data Our World in Data A maternal death refers to the death of a woman while pregnant or within 42 days of termination of pregnancy, irrespective of the duration and site of the pregnancy, from any cause related to or aggravated by the pregnancy or its management but not from accidental or incidental causes. 140,000 500,000 120,000 400,000 100,000 North America Europe & Central 80.000 300,000 Latin America & Caribbean 60,000 East Asia & Pacific 200,000 South Asia 40,000 → Democratic Republic of Congo Sub-Saharan 20.000 100,000 Africa 1990 1995 2000 2005 2010 2015



-1--2-We don't **know** enough. We don't **distribute** what we know.

Tech Can Help



- 1. SMART DEVICES
- 2. NANOTECHNOLOGY
- 3. ARTIFICIAL INTELLIGENCE

WE HAVE THE TOOLS TO KNOW MORE.











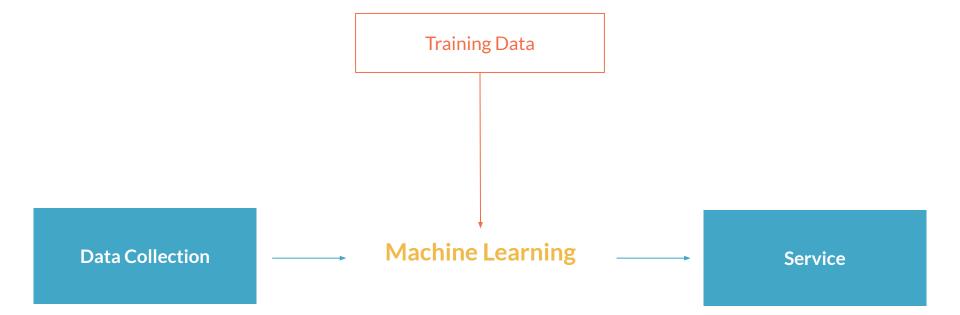








Data Collection ——— Machine Learning ——— Service



Anomaly Detection



Data Collection Data Understanding

Women are diagnosed **4** years later for most diseases; **2.5** years later for cancer; **4.5** years later for metabolomic diseases

Forecasting







Most women experience birth control side effects because contraceptive methods aren't personalized.

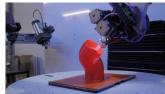
- 1. MOBILE TECHNOLOGY
- 2. 3D PRINTING

WE HAVE THE TOOLS TO DISTRIBUTE CHEAP PRODUCTS AND KNOWLEDGE.





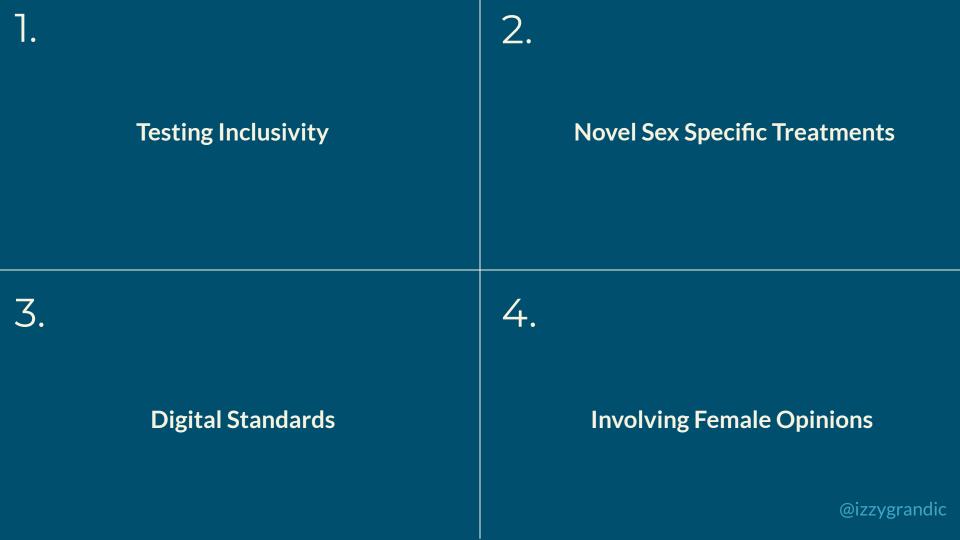






CHEAPER PRODUCTS

SCALABLE INFO



Testing Inclusivity

Diverse Clinical Trials.

Women are represented in <20% of clinical trials.





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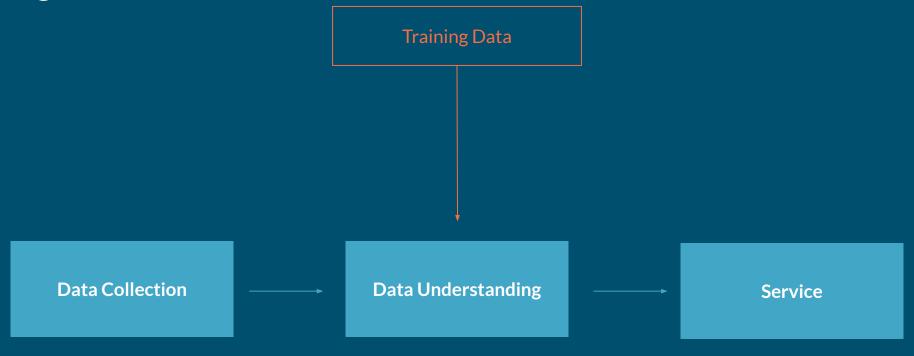
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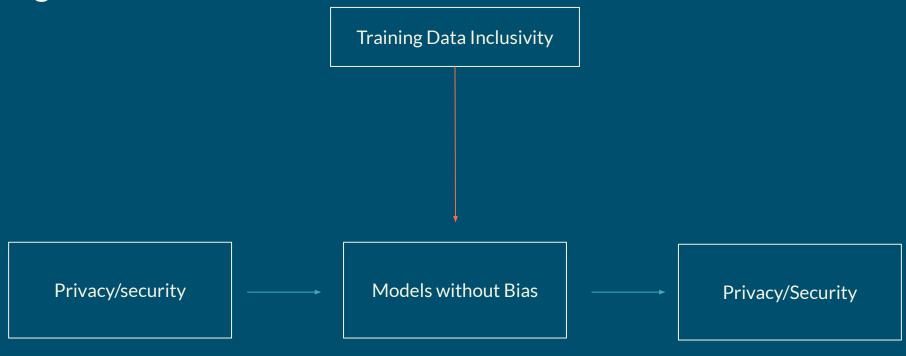
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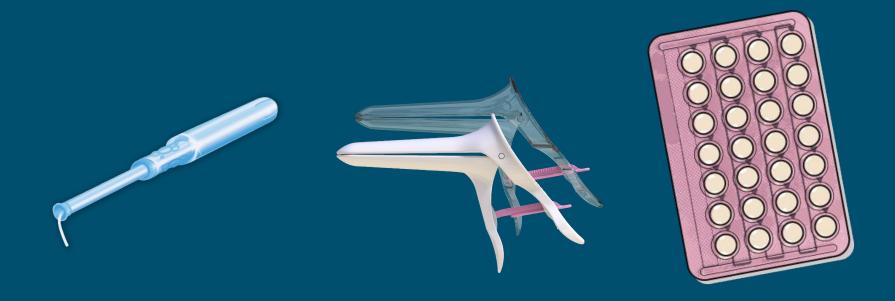
Digital Standards



Digital Standards



Involving Female Opinions

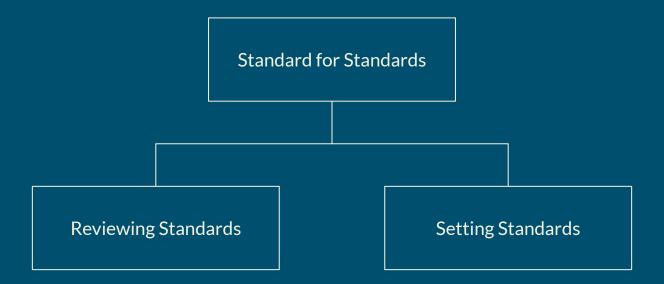


Involving Female Opinions

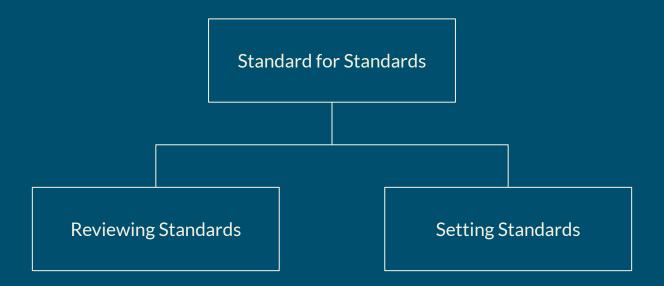
Reviewing Standards

Setting Standards

Involving Female Opinions



Involving Diverse Opinions





Contact Me



Learn More

