Primary Care Women's Health Society

PCWHS: Advancing Women's Healthcare Through Education and Advocacy

The Primary Care Women's Health Society (PCWHS) is dedicated to advancing women's health in primary care through high-quality, evidence-based education, professional collaboration, and advocacy. By supporting HCPs, promoting best practice, addressing health inequalities, and contributing to national policy and guideline development, the Society aims to improve the quality and accessibility of women's healthcare across the UK.

OVERVIEW

The PCWHS started in 2007 as the Primary Care Women's Health Forum. The founding members were general practitioners with a special interest in women's health who had just finished their post-graduate diploma in gynaecology at the University of Bradford, UK. They recognised that there was no provider of women's health education for those working in primary care and started an organisation that would be similar to primary care societies in other areas such as dermatology. Working with very limited resources, they published a journal and ran educational events for primary care practitioners with an interest in women's health.

The Forum has now been renamed as the PCWHS, and the 1,000 member threshold was passed in 2026, with 200 attendees at the most recent conference. Membership includes doctors, nurses, pharmacists, paramedics, physiotherapists, and other HCPs with an interest in women's health in primary care. The PCWHS contributes to the creation of guidelines by organisations such as the National Institute for Health and Care Excellence (NICE) and works collaboratively with Royal Colleges that have primary care relevance. It has a Facebook group, hosting active discussions about both clinical matters and the commissioning of women's health services in primary care.

The PCWHS' aims are as follows:

- Provide high-quality, practical, and evidence-based education to healthcare clinicians across the entire primary care team.
- Support the development of evidence-based practices in primary care by translating current research into practical resources and sharing best practices in women's health.
- Ensure we include underserved populations, particularly ethnic minorities and those in deprived or marginalised areas, to address health inequalities.
- Provide opportunities for peer support, networking, and the exchange of views between our members.
- Contribute to national and local discussions, ensuring that the experiences and views of primary care clinicians are considered in shaping women's health policy and practices.

Women's health is not exempt from the challenges facing the rest of the NHS, with themes of increasing demand and under-funding. The 2026 women's health strategy outlined significant health inequalities; women spend more years in ill health than men, and the wealthiest 10% of women live almost 10 years longer than the poorest 10%. Maternal mortality is significantly higher in Black women than their White counterparts, and babies born to Black women are more than twice as likely to die in their first year than those born to White women. The diagnosis of conditions such as endometriosis can take years, and there are concerns about undertreatment of cardiovascular risk factors in women and under-recognition of the sometimes atypical presentation of heart attacks in women.

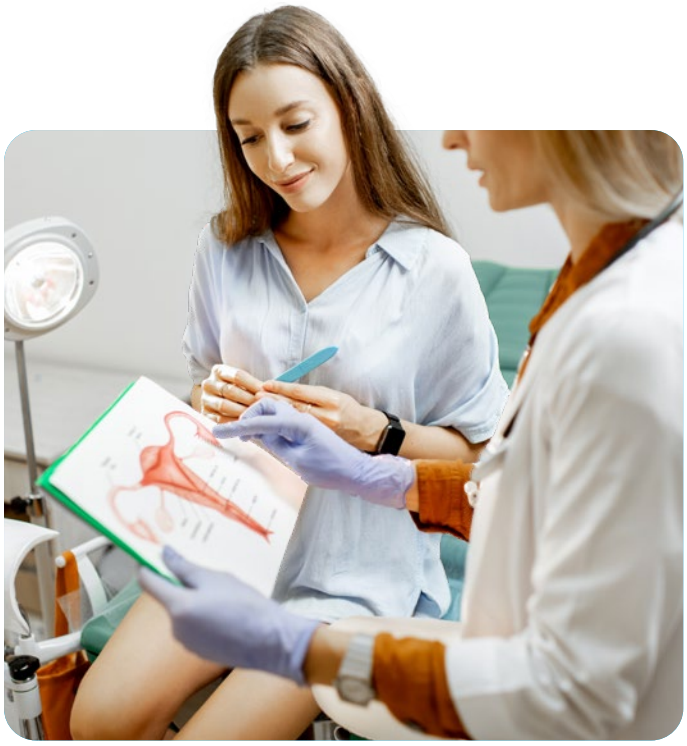
The NHS 10-year plan aims to move care into the community, which is welcome news for those in primary care with an interest in women's health, but resourcing and the ability to make long-term plans are an issue; community services are frequently given contracts lasting only a year or two. As well

as providing education on clinical topics, the PCWHS is active in the area of healthcare planning for women. They attend All-Party Parliamentary Group meetings where they have given their input in discussions on a variety of topics, including the delivery of sexual and reproductive healthcare and the management of common conditions such as fibroids. The PCWHS carries out surveys to inform the resourcing of long-acting contraceptive provision in the community and attempts to ensure that community women's health services are adequately resourced in the long term. Their Women's Health Hub toolkit is a practical resource that can be used by clinicians and commissioners looking to set up community women's health services.

This is an exciting time to be involved in women's health, with multiple new developments. Management of the menopause and perimenopause has been transformed over the last decade, with hormone replacement therapy prescribing having trebled since 2015/2016. Women who have had breast cancer and often can't have systemic hormone replacement therapy are getting more options, with two neurokinin-3 antagonists having been approved by the Medicines and Healthcare Products Regulatory Agency (MHRA) and one of them having achieved NICE approval.

The renaming of polycystic ovarian syndrome as polyendocrine metabolic ovarian syndrome (PMOS) reflects the increasing recognition that PMOS is a complex multi-system condition rather than one just affecting the ovaries. The PCWHS is contributing to the upcoming NICE guidance on this and looks forward to seeing more holistic management of women with PMOS. Two completely new diagnostic tests for endometriosis are being reviewed by NICE, although it remains to be seen how implementation in primary care will actually be managed, and new medication options for fibroids and endometriosis should improve outcomes for women with these complex conditions.

Looking ahead, PCWHS board members have contributed to a general practitioner with extended role framework in women's



health, which is shortly to be published by the Royal College of General Practitioners (RCGP). They are working with NHS England on their framework for practitioners with an extended role in women's health, and will have their first study day for this cohort later in 2026. With a growing membership and a larger committee, the PCWHS has the capacity to provide more education and leadership and hopes to have real influence in the provision of primary care women's health service in the years to come.

Toni Hazell
Director, Primary Care Women's Health Society (PCWHS), UK

Primary Care Women's Health Society