

April 26, 2024

Chair Patty Murray
Senate Appropriations Committee
Room S-128, The Capitol
Washington, D.C. 20515

Vice Chair Susan Collins
Senate Appropriations Committee
Room S-128, The Capitol
Washington, D.C. 20515

Chair Tom Cole
House Labor, Health and Human Services and
Education Appropriations Subcommittee
H-307, The Capitol
Washington, D.C. 20510

Ranking Member Rosa DeLauro
House Labor, Health and Human Services and
Education Appropriations Subcommittee
H-307, The Capitol
Washington, D.C. 20510

Dear Chairs Murray and Cole, Vice Chair Collins, and Ranking Member DeLauro:

We thank you for your continued efforts to fund and prioritize women's health research. As leaders in the women's health community, we urge you to prioritize women's health research in the FY2025 appropriations process. Specifically, we are requesting a substantial funding increase for women's health research that will advance health while generating significant economic returns that include five FY2025 appropriations bills:

- Department of Health and Human Services – National Institute of Health's Common Fund and Office of Research on Women's Health
- Food and Drug Administration – Women's Health Center of Excellence
- Department of Defense – Congressionally Directed Military Research Program
- Veterans Affairs – Women's gender-specific care
- Department of Commerce – National Science Foundation

Women's health is defined as those diseases and conditions that solely, disproportionately, or differentially impact the health of women across their lifespans. As we detail below, women's health has been chronically overlooked and underfunded, with significant consequences for women, their children, and the US economy. As women's health innovators, entrepreneurs, funders, researchers, payors, healthcare providers, educators, and advocates spanning the entire women's health innovation ecosystem, we have joined forces to share expertise, educate, and advocate to address the many unmet health needs facing women. We support the recent White House Initiative on Women's Health Research and the bipartisan Congressional efforts to enhance women's health research and would like to be a resource to you as you work to craft the FY2025 appropriations bills and related policies.

We thank Congress for being instrumental in addressing women's health disparities over the past three decades: enacting the landmark NIH Revitalization Act in 1993 that mandated the inclusion of women and people of color in clinical research, requiring consideration of sex as a biological variable (SABV) in NIH-funded biomedical research in 2016, and establishing the Office of Autoimmune Disease Research within the Office of Research on Women's Health (ORWH) in 2023. Despite these initial strides toward increasing diversity and inclusion in clinical trial research, significant challenges remain. Some examples include:

- Heart disease – the number one killer of women – disproportionately impacts women after menopause. Heart attacks are harder to recognize, diagnose, and treat in women, which results in increased rates of emergency room visits, death, and development of related chronic conditions and disabilities. Women are twice as likely to die following an emergency room admission for this condition due to misdiagnosis, according to NIH.
- Conditions that uniquely impact women, such as endometriosis, fibroids, polycystic ovarian syndrome (PCOS), and certain pregnancy complications like preeclampsia, further increase the risk that women will develop some form of heart disease within the next 30 years of their life. These conditions collectively impact over 30% of women, and yet we have limited means for diagnosing and treating them, according to NIH.
- Two-thirds of Alzheimer’s patients and 80% of autoimmune disease patients are women, according to the CDC.
- The mortality rate for ovarian cancer patients is 50%, which is the highest of any sex-specific cancer. Furthermore, non-smoking related lung cancers have risen 84% in women while dropping 36% among men over the past 42 years, according to the NCI.
- Obesity affects 1 in 3 American women, and disproportionately impacts women of color (57% of Black women and 44% of Hispanic women). It is also associated with over 200 other health conditions that impact women across the lifespan, including fertility issues, breast and ovarian cancers, and more.
- Pregnancy also poses unique health challenges to women, and many pregnancy complications lead to lifelong increased risks for metabolic, cardiovascular, musculoskeletal, and mental health conditions for mothers, as well as significant long-term impacts on their children and families. As a result, we continue to face unnecessarily high maternal morbidity and mortality rates.

Furthermore, socioeconomic determinants and race amplify disparities. For example, Black women are *three times* more likely to die from a pregnancy-related cause than White women, according to the CDC. The reasons for many of these sex-based differences remain unknown and under-studied. More research and new innovations are vital to providing better treatments, diagnostics, and devices to close these gaps. Additional research must also focus on preventive health measures, as efforts to thwart diseases or conditions before they even occur would have a substantial impact on countless women’s health. Increased investment in women’s health research would not only increase scientific knowledge and advancements to improve health outcomes for women throughout the lifespan, but also generate significant return on investment to the economy. Women not only are disproportionately impacted by many diseases and chronic conditions, but also comprise 80% of health caregivers, both in and out of the home. Women also play an increasingly vital role in our armed services and overall workforce. Every \$1 invested in women’s health is projected to return \$3 to economic growth, according to the 2023 McKinsey report, *Closing the Women’s Health Gap: A \$1 Trillion Opportunity to Improve Lives and Economies*. Within the United States, doubling the NIH grant funding in four key areas of health (heart, brain, autoimmune and lung cancer) would total \$350 million and produce \$14 billion ROI, according to the 2020 RAND Corporation report commissioned by Women's Health Access Matters (WHAM).

Therefore, we urge you to provide substantial funding increases in five appropriations bills in FY2025 for programs dedicated to funding critical research in women's health as follows:

- Add \$500 million to the NIH Common Fund within the Labor, Health and Human Services and Education Appropriations bill focused on women's health research and innovation, increasing the FY23 budget of \$735 million to \$1.235 billion
- Double the funding for the NIH Office of Research on Women's Health from FY24 budget of \$76.48 million to \$153.9 million within the Labor, Health and Human Services and Education Appropriations bill
- Establish a \$10 million FDA Center of Excellence on Women's Health Innovation within the Agriculture, Rural Development, Food and Drug Administration and Related Agencies Appropriations bill that functions like the Oncology Center of Excellence, ensures clinical trial design is representative of disease impact in the broader population, and includes a fast track process in women's health
- Create \$50 million Women's Health Research Program within the DoD Congressionally Directed Medical Research Program within the Defense Appropriations bill and require an annual report to Congress of the amount and percentage of funding for women's health research within the agency
- Include \$13.7 billion for women Veterans' healthcare, including \$1.1 billion toward women's gender-specific care within the Military Construction and Veterans Affairs Appropriations bill
- Establish a \$10 million NSF Women's Health Innovation Program within the Commerce, Justice and Science Appropriations bill dedicated to computer science, artificial intelligence (AI), and/or engineering to support research and development within digital technologies to advance the health of women in recognition of the historical exclusion of women limiting accuracy of data used in AI to ensure bias that can be harmful is eliminated

Lastly, we ask that you embrace an interagency approach to women's health. Encouraging all federal departments supporting innovation and conducting research to share their data and resources to accelerate the development of scientific knowledge, research, and medical advancements that improve the health of women.

Thank you for your consideration. If you have any additional questions or need further justifications for the above request, please feel free to contact Liz Powell at lpowell@G2Gconsulting.com.

Sincerely,

Liz Powell, Esq., MPH
Founder & President
G2G Consulting / Women's Digital Health Network

Linda Goler Blount, MPH
President
Black Women's Health Imperative

Christina Isacson, PhD
Partner
Lightstone Ventures

Linda Greub, CFA, MBA
Co-Founder
Avestria Ventures Management

Eliza Chin, MD, MPH
Executive Director
American Medical Women's Association

DeChane Dorsey, Esq.
Executive Director, AdvaMed Accel
AdvaMed

Kathryn Schubert
President & CEO
Society for Women's Health Research

Heather L. Maurer, MA, CAE
CEO, National Association of Nurse Practitioners in
Women's Health

Alicia Chong Rodriguez, MSc.
CEO
Bloomer Health Tech Inc.

Jennifer Namazy, MD
Chairman & Professor of Clinical Medicine Scripps Clinic,
American Academy of Allergy Asthma and Immunology

Mary Romano, MD MPH
Advocacy Co-Chair, North American Society of
Pediatric and Adolescent Gynecology

Sasha Ottey, MHA
Executive Director, PCOS Challenge: The National
Polycystic Ovary Syndrome Association

Lebone Moses
Founding General Partner
GIV Capital Fund

Priyanka Jain
Co-Founder & CEO
Evvy

Tracy Zvenyach, PhD, MS, RN
Director, Policy Strategy
Obesity Action Coalition

Karla Shepard Rubinger
Executive Director
Rosalind Franklin Society

Monica Mallampalli, PhD
Executive Director
Alliance of Sleep Apnea Partners (ASAP)

Carolee Lee
Founder & CEO
Women's Health Acces Matters (WHAM)

Lori Frank, PhD
President
Women's Health Acces Matters (WHAM)

Clare Dougherty
CEO
Brem Foundation to Defeat Breast Cancer

Millicent Gorham
Executive Director
Alliance for Women's Health & Prevention

Martha Nolan
Senior Policy Advisor
HealthyWomen

Elizabeth Bailey, MPP
Managing Director
RH Capital

Jasmaine McClain
Executive Director, Health Equity Alliance, The
Health Management Academy

Laurie Fenton Ambrose
President & CEO
GO2 for Lung Cancer

Pamela Brug
President
New Jersey Black Women Physicians Association

Celia Serkin
Executive Director, Montgomery County Federation of
Families for Children's Mental Health, Inc.

Charmayne Anderson
Director of Advocacy
Allergy & Asthma Network

Sanskriti Thakur, MBA, MS
Founder & Chairwoman
Tower Capital Group

Nada Hanafi, MSc. MPH
Founder & Manager
MedTech Strategy Advisors, LLC

Willa Bluestone
Director, Policy and Workforce Strategies
Ohio Life Sciences Association

Kay Koplovitz
Co-founder & Chairman
Springboard Enterprises

Sophia Yen, MD, MPH
Co-Founder, Chief Medical Officer
Pandia Health

Latrice Eggleston Williams, PhD, JM
First Vice President of Programs
NCBW100 Chicago Metropolitan Chapter

Alice Zheng, MD, MPH, MBA
Principal
RH Capital

Julienne Verdi
Executive Director
Alliance for Headache Disorders Advocacy

Stephen Rapundalo, PhD
President and CEO
Michigan Biosciences Industry Association (MichBio)

Valerie Palmieri, MLS (ASCP)
CEO/Founder
Momentum Consulting

Karla F. Loke, DO
Chief Medical Officer
FEMSelect Ltd

Leslie Ferris Yerger, MBA
CEO and Founder
My Density Matters

Shireen Abdullah
Founder
Yumlsh

Deborah J. Garner
Co-CEO
FEMSelect Ltd.

Martha Lawrence
CEO
AccendoWave

Adrienne Griffen, MPP
Executive Director
Maternal Mental Health Leadership Alliance

Susan Stone, MBA
CEO & Executive Director
National Headache Foundation

Jamie Zahlaway Belsito
Founder/Director of Policy and Partnerships
Maternal Mental Health Leadership Alliance

Rachel Braun Scherl
Managing Partner
SPARK Solutions for Growth

Nicole Sandford
Chief Executive Officer
Aspira Women's Health

Urvashi Bhatnagar, DPT, MBA
Managing General Partner
The Good Science Fund

Matthew J. Smith, Ph.D.
Co-Founder
Embr Labs Inc.

Kerry Rupp, MBA
General Partner
True Wealth Ventures

Jessica Karr
Managing Director
Coyote Ventures

Emily Man, MS
Co-Founder & CEO
Venova Technologies

Alessandra Henderson, MBA
Co-Founder & Board Member
Elektra Health

Marissa Fayer, MBA
CEO
HERhealthEQ / DeepLook Medical

Joseph Leonelli, PhD
SVP & GM, ATCC Federal Solutions
ATCC

Iris Olson, MPH
Center Manager
CONVERGE at the University of Pittsburgh

Caron Trumbo
VP Operations
Virginia Bio

Piraye Biem, PhD
CEO
Celmatix

Sateria Venable
Founder & CEO
Fibroid Foundation

Taja Lester
Founder
Health Equity Capital

Mark Connell
President
SLBST Pharma

Brittany Barreto, PhD
CEO
FemHealth Insights

Peter Pacult, MBA
CEO & Co-Founder
Avana Health

Allison London Brown
Chief Executive Officer
LUMINELLE

Saralyn Mark, MD
President/Founder
iGIANT

Missy Lavender, MBA
CEO
Renalis Health

Carrie Haverty, MS, CGC
VP of Product
Mirvie

Tracy MacNeal, MBA
CEO
Materna Medical

Shikha Barman
Founder and CEO
Integral BioSystems

Mary Ludlam PhD
Founder & CEO
Cairn Biosciences

Priya Bathija
Founder and CEO
Nyoo Health

Gail Maderis
Chairwoman
Antiva Biosciences, Inc.

Erika Smith, MBA
CEO
ReNetX Bio

Susan Molineaux, PhD
CEO
Para Therapeutic

Mayra Hurtado
Co-Founder / CEO
Prelude Health

Tracy Dooley, MD
Partner
Avestria Ventures

Becca Williams
Founder + CEO
Menopausey, LLC

Guillaume Cohen-Skalli
Co-Founder and CEO
Paloma Health

Maria Soloveychik, PhD
CEO
SyntheX

Alison Sizer
Founder
Growth Impact (www.growthimpact.co)

Sabrina Martucci Johnson
CEO
Daré Bioscience, Inc.

Clifford M. Samuel
Board Member
Antiva Biosciences

Margaret Melville MBA
CEO
Lasa Health

Danielle Ralic
CEO
Ancora.ai

Julia Fan Li, PhD CA
CEO
Micrographia Bio

Kerry Grennan
Nurse Practitioner
MGH

Veranda Rodgers, MBA
Executive Director
Pregnant with Possibilities Resource Center

Jessica Bell van der Wal, MBA
CEO
Frame

Katie Severt MBA
Founder
Let's Talk Women

Elizabeth Lee B.Sc., R.N.
Founder, CEO
Executive Fertility Consultants

Stasia Obremskey
Managing Director
RH Capital

Annie Theriault, PhD, CFA, ICD.D
Managing Partner
Cross-Border Impact Ventures

Akifa Khattak, Esq., MHA
Founder and Healthcare Attorney
Qodiva

Rachel Bartolomew MBET
CEO
Hyivy Health

Heather Ritchie, MSc
CSO
Embr Labs

Sharon Moayeri, MD, MPH, MS
Physician Founder Owner
OC Fertility + OC Biogenix

Lauren Elliott, MA, MHFA
Founder and CEO
Candlelit Care

Ebony Wrenn, Ed.D.
Program Director
Mom Congress

Jodi Neuhauser, MBA
CEO & Founder
In Women's Health

Lynn Seely, MD
President & CEO
Lyell Immunopharma

Jane Lapon, BSc, MRPharmS
CEO
Atorvia Health Technologies

Naseem Sayani
General Partner
Emmeline Ventures

Marilyn Berchie-Gialamas DNP CRNP NP-C
Healthcare Director
Trinity Wellness

Alise Reicin, MD
President & CEO
Tectonic Therapeutic

Barbara Schuler, MPH
CEO and Founder
VAX 2 STOP CANCER

Tejal Patel MS
Senior Program Associate
Rhia Ventures

Curtis Alan Bagne, PhD
President
DataSpeaks

Rachel Butler
President
Catalytic Impact Foundation

Lindsey Williams
CEO
MyUTI

Yotam Hod
CEO & Co-Founder
Gynica

Wendy Strgar
CEO
Vaginal Biome Science

Simal Ozen Irmak, PhD, MPH, PMH-C
CEO & Co-Founder
Tibi Health

Vanessa Jupe
Founder and CEO
Leva

Liz Klinger
Co-Founder and Former CEO
Lioness

Maureen Brown
CEO & Co-founder
Mosie Baby

Leanne Pichay, MSE
CEO
Discova

Aayushi Patel
Tax Associate
APC Accounting and Tax Inc.

Elizabeth Ruzzo, PhD
CEO
Adyn, Inc

Natalie Benamou, MBA
President
HER HEALTHX

John La Puma, MD
Founder
Chef Clinic/Chef MD

Leslie Taylor
Co-Founder
Half the Sky LLC

Kathleen Morrison, PhD/ABD, MPH
Founder/CEO
ODLRx

Pamela Miles, MS
Founder
Apothecare

Christine Rohan MBA
CEO
Vasowatch Inc

Angela Spang
President
JUNE Medical USA Inc

Amy Cuevas Schroeder
Founder & CEO
The Midst

Vemari M Rivera, PhD
CEO
Vemari Rivera Group

Neil Ray, MD
CEO & Founder
Raydiant Oximetry, Inc

Sabrina Johnson
CEO
Daré Bioscience

Kevin Eisenfrats
Co-Founder and CEO
Contraline, Inc.

Sarita Parikh, MSPT
Founder
Mind, Body & Play Therapies, LLC

Corinne H Nevinny
Partner
Avestria Ventures

Ethel Rubin, PhD
President & CEO
Mirabile Lifesci Advisory, LLC

Holly Rockweiler, MS
CEO
Madorra

Nicole K. Paulk, PhD
CEO, Founder, President
Siren Biotechnology, Inc.

Maryon Stewart BEM
CEO
Femmar Health Corp

Shadi Saberi, PhD
CTO
iSono Health

Barry McCann
CEO
Nua Surgical

Arkady Rubin, PhD
President/Chief Scientific Officer
Arstat Pharmaceuticals inc.

Michael Liebman. PhD
Managing Director
IPQ Analytics LLC

Stephanie Schull, PhD
CEO
Kegelbell

Allison Lewin
Founder & Menopause Coach
Menowar

Marina Vieva
Founder&CEO
FemiSpace Co.

Derek Sham, BEng, MBA
Founder & CEO
Cosm Medical

Ediuska laurens, M.S., Dr.Eng.
Founder & CEO
Genius Shield

Allie Brumel
Co-Founder, COO
The Breasties

Manju Dawkins, MD
CEO, Co-Founder
Thimble Health

Catherine Carlson
Director of Partnerships
LEVY Health

Shweta Gohil, MSN MPH
Director of Healthcare Strategy
Levy Health

Rosana Rabines, MBA
Managing Partners
GWP Impact

Rachel Diamond, PhD, LMFT, PMH-C
Owner
Rachel Diamond, PLLC

Fehmida Kapadia, PhD
President
Kapamed Consulting

Carrie Robbins
Principal
Robbins Insights

Marina Rigau, PhD
CEO & co-founder
MIMARK Diagnostics, S.L.

Bethany Quinn, MBA
Founder & CEO
Quinntersectional

Varun Kapoor, MD, MBA
CEO & Co-Founder
Nura Health

Riya Dhaliwal
CEO
Hatch Health

Melisa Holmes, MD
CEO, Co-founder
Girlology, Inc.

Garrett Wood Kusmierz
CEO
kozēkozē

Stephanie Collins, RN, BSN
Co-Founder and Managing Partner
BioLaunch Solutions

Tracy Warren
Founder
Astarte Ventures

Carrie Hankey
CEO
Rooted Foods

Teneha Brown, CEO & Founder
CEO & Founder
The VagiPlug Co

Alaina Macia
CEO
MTM

Ryan Yoo
Chief of Staff
Genetesis, Inc.

Miller Morris, M.A., MPH
Founder & CEO
Comma

Zoe Nelson
Founder
Healthy Hearts at Home

Hasti Nazem
Head of Product
Kindra

Holly Jones
President, Founder
HERstory In Color

Sheila Pande, MPH
CEO, Founder
Tandem Community

Aagya Mathur
Co-Founder & CEO
Aavia

Hannah Shen, PhD
CEO
AcaciaBio

Riley Smith
President
Tiros10 Consulting

Michelle Agudelo
Founder
Haus of Flow LLC

Wanda L. McArn
CEO
Next Step Development Corporation

Renee Deming, MS
COO
Stealth Company focused on women's health

Sofía Carbone
Communications Coordinator, SisterWeb San
Francisco Community Doula Network

Raven Chesnavage
CEO/Founder
Helix Development

Sreekar Kothamachu
CEO
Nesa Medtech

Ffion Storer Jones
Senior Advocacy Officer
DSW

Frederika McClary Easley
Founder
Flow to Heal LLC

Stacy Arrazcaeta
VP External Operations
Rubix LS

Krystal Leaphart
Senior Policy Analyst, Reproductive Health
Impact: The Collective for Equity and Justice

Ashley Alridge
Executive Director
The Brown Egg, Inc.

Mashana Smith, PhD
Member
National Coalition of 100 Black Women

Jackie Sharp
Member, National Coalition of 100 Black Women
Metropolitan Chicago

David Grant
CEO
G5 Biological Innovations

Karli Büchling MBA
Mrs
Yoni Health

Destiny Flanagan
Program Manager
Project Nana, Inc.

Sanj Singh, MBA
CEO
Temple Therapeutics US Inc.

Kathleen Gallo, MS
Director, Clinical and Regulatory Affairs
Channel Medsystems

Devra Densmore, MPA
Founder & Principal Consultant
Elevate Advocacy

Carmen Brammer
CEO/Founder
Global Majority Consulting

Tammy Watkins
MSW
Alpha and Omega Community Services

Ashley Jelks
Founder
High Priestess

Tana Yasu
Proprietor
Pink Boutique

Amiee Smith
CEO
Bold Heights Solutions

Nedra Smith
Business Consultant
Starting Now Right Now

Keith McCormick
VP
Forward Health Communications

Jannalee Johnson , BSBM
Owner
Canyon Bio Science LLC

Sondra Brooks
Owner
PYP Consulting

Hawanya B Miller LMFT
Owner, Psychotherapist
Move Toward Change LLC

Candice Whigham
Owner
Courage To Save CPR Training, LLC

Pia Monique Murray
Founder/Producing Artist
PMMDC

Christie VanHorne, M.ED, MPH
President
CVH Consulting, LLC

George Pounds, CLS, MBA
CEO
Entasis Consulting, Inc.

Freda Perlman
President of BGOLD Diversity & Inclusion
Network, Sabre, Inc.

Georgie Kovacs
CEO and Founder
Fempower Health

Dave Esra, CEO, Bobi, Inc.
CEO
BobiHealth

Amy Beckley PhD
CEO
Proov

Felicity Yost
Cofounder / President
Tia - a women's healthcare company

Zachary Lyon - CEO H3Pelvic Therapy Systems
CEO/President
H3Pelvic Therapy Systems

Eve McDavid
CEO & Co-Founder
Mission-Driven Tech

Kimball Wilkins, Ph.D.
Founder
Hourglass Health LLC

Eva Garland, Ph.D.
CEO
Eva Garland Consulting

Carli Sapir
Founding Partner
Amboy Street Ventures

Andrea L. Braden, MD, IBCLC
CEO & Founder
Lybbie

Lynn M. Banaszak
President
The Caileigh Lynn McDowell Foundation

Sonya Young Aadam
CEO
California Black Women's Health Project

Pita Navarro
Co-Founder
Evvv

Kamari Richardson
Creator
Girls Who Grind

Jannine Versi, MBA
Co-Founder & CEO
Elektra Health

Z. Colette Edwards, MD MBA
Founder
pausitive health

Alison Greenberg
Co-founder + CEO
Ruth Health

Crystal Tyler, PhD, MPH
Chief Health Officer
Rhia Ventures

Roni Cantor-Balan, MSc
Founder & CEO
Ciconia Medical

Lori Evans Bernstein
CEO & Co-founder
Caraway Health

Tiffany Meyer
Owner
The Heights Insurance Agency

Karla Shepard Rubinget
VP
Mary Ann Liebert Inc

Joia Crear Perry
President
National Birth Equity Collaborative

Nkem Osian, MPH
Director of Partnerships
The White Dress Project

Kate Hermans
CEO & Chair
AlzWell

Felicia Sandoval
Founder/CEO
FemmeLoop

Meta J. Mereday
Founder/ Lead Civilian Advocate, Veterans
Entrepreneurial Development Initiatives, Inc (VEDI)

Helena Harnik
Program Executive Director and Co-Founder
The Synergist

Garry Derenoski RRP, CIP. Pro Dir.
President & CEO
Bridges Health Services Inc.

Carol Johnson
CEO and Founder
Uterinekind

Kamila Staryga
CEO and Co-founder
Women AI (dba Rita Health)

Nola Masterson MSc
Managing Director
Scienc Futures LLC

Jane Miller, MBA
VP of Special Programs
GoMo Health

Hilary Kirchner
Owner & CEO
Dream Write Creative

Margo L. Thomas
Executive Director
Crenshaw Health Partners, Inc

Ariel Kramer
Founder
Klover Communications

Sourav Sinha
Chairman
Jumpstart Fertility

Daisy Robinton, PhD
CEO
Oviva Therapeutics

Liz Earley
Co-Founder and Chief Business Officer
Venova Technologies

Carolyn Wheeler
Ceo
Vella Bioscience

Laura Gutierrez
Director
Grip Venture Studio

Jillian Miranda, MA
Cofounder & COO
FeelBetr

Anuja Dokras, MD, MHCI, PhD
Executive Director
Androgen Excess: Polycystic Ovary Syndrome Society

Ghassan Saed, PhD
President and founder
DS Biotech, LLC

Sharon DeLay
President and Owner
GO-HR

Lisa Richardson, PhD
CEO
The Institute of Women & Ethnic Studies

Xiafei Jin
CEO
Summer Blossom Capital

Oriana Papin-Zoghbi
CEO & Co-Founder
AOA Dx

Robert Mayers
Principal Life Sciences Consultant
Meld Partners

Nicole Shugrue, MBA
Strategic Advisor
Juniper Biomedical

Navneet Kaur
Founder & CEO
FemTech India

Malgorzata Jaremko, PhD, DABMG, FACMG, MBA
Founder & CEO
Gosia Genomics Inc

Heather Hirsch
CEO, FOUNDER
Health by Heather Hirsch MD Collaborative

Jeffrey kaplan
Founder
The A to Z Impact Foundation

Marina Tarasova
Co-Founder, COO
Paloma Health

Alexandra Fennell, Esq.
Co-Founder
Attn: Grace

Yvonne Rodriguez, Founder/CEO
CEO
Equality Sciences, Inc

Matt Raney
VP Business Development
Aspira Women's Health

Lindsey Calcutt, PhD
CEO
Incora Health

Thang Vo-Ta
CEO & Co-Founder
Calla Lily Clinical Care Ltd

Alia Rahman
Co-Founder & CEO
Amplexd Therapeutics, Inc.

Laura Padilla-Sauber, MHA, CHC, CHPC
CEO
Sauber Consulting LLC

Elena Rueda
CEO
Dama Health

Bayo Curry-Winchell, MD, MS
Founder/Physician/Health Equity Advocate
Beyond Clinical Walls

Leona Hariharan
Partnerships
Mama Glow

Kristi Slack Leisinger, MBA
CEO/Founder
Copperleaf Consulting Group

April Roy
CEO
femPAQ Inc.

Jill Angelo
CEO
Gennev

Rochelle Prosser, RN, CLNC
Founder, CEO
Orchid Healthcare Solutions, LLC

Kathleen Keefe
Owner/President
Activities To Go Inc.

Amanda Burkardt, MSc, MIT, MBA
CEO
PHIOGEN

Cindy Borassi
Co-Founder and CEO
United National Services

Adrienne Day, PhD
CBO
Celmatix Inc

Rachel Culp-Hill, Ph.D.
Mass Spectrometry Scientist
AOA Dx

Lauren Orlick
Co-Founder
HeartSnug

Katelyn Marini
Managing Director
The Bowdoin Group

Deborah A. Bussiere
Founder & CEO
healthpass1

Andrea Cubitt
CEO
Dionysus Digital Health, Inc

Nara Lee, Esq.
Founder & CEO
Doveras Fertility

Aceil Halaby
COO
Bloomer Tech

Ikram Guerd
VP of Global Marketing
Aspivix

Jessica Schram, MBA
Director of Investments & Incubations
Remedy Product Studio

Eric Dy, PhD
Co-founder & CEO
Bloomlife Inc

Ida Grønberg, PhD
CEO
Cacta ApS

Donna Russell, MHA
CEO
Precia Group LLC

Eydis Lima, MSc
Founder & CEO
Curiva

Charlotte Sue McKinney, JD
CEO | Founder
Altin Biosciences Corporation

Erin Finefield, MBA
Principal
New Day Venture Capital

Meghan Doyle
CEO
Partum Health

Nancy Whiting, PharmD
CEO
Recludix Pharma

Jessie Juusola, PhD
Founder/CEO
Anchor Outcomes LLC

Emily Steinberg, MBA
Strategy and Business Development Manager
Partum Health

Tanika Gray Valbrun
Founder/Executive Director
The White Dress Project

Wendy Anderson
Co-Founder and Investing Partner
The Case for Her

Shannon Field
CEO & Founder
SoShe Inc.

Allison Watkins
CEO
Watkins-Conti Products, Inc.

Emily Stein
CEO
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