Letter to the Editor

Scientific evidence denial and discrimination in women's health

Negación de la evidencia científica y discriminación en la salud de las mujeres

To the Editor:

Recently, the President of the United States declared an association between the use of paracetamol during pregnancy and the diagnosis of autism or attention deficit hyperactivity disorder.[1] This statement, only slightly qualified by the Food and Drug Administration, which referred to a "possible" association without any causal relationship,[2] has generated significant social alarm and prompted recommendations to avoid its use in pregnant women, despite the lack of supporting scientific evidence.[3]

This warning, devoid of scientific basis, could be dismissed as just another *"boutade"* from the President of the United States or, under a more charitable interpretation, as a supposed concern for children's health. However, it constitutes a new and insidious attack on women's freedom. Blaming women for diseases and other health problems is a recurrent practice that reinforces a patriarchal structure in which women are expected to assume responsibility and bear the burden of care, not only for their own health but also for that of their relatives. This dynamic appears in diverse situations, such as sexual violence, with a detrimental impact on both health and healthcare.

Paracetamol remains the safest drug and the only option for treating fever or pain during pregnancy.[3] The social alarm created by linking its use to autism in children has devastating repercussions on the health and well-being of women at such a crucial stage of life as pregnancy and motherhood.

Once again, we witness attempts to normalize discourses in which women's health is not a priority.[4] This also opens the door to blaming women for fetal health, restricting pregnant women's access to safe treatments, and reinforcing anti-abortion policies by prioritizing fetal health. In this way, basic principles of public health and health promotion, such as autonomy, decision-making regarding one's own health and its determinants, and equity in access to health services and healthcare, are undermined.

The denial of scientific evidence endangers public health,[5] and the scientific community cannot remain on the sidelines.[3,4] This case illustrates discrimination in women's health through their invisibilization and instrumentalization, which may lead to the legitimization of restrictive policies on sexual and reproductive rights, as well as the erosion of trust in health systems and healthcare professionals.

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Conflicts of interest

None.

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