Managing the Metabolic Spectrum

A Blueprint for the Women's Metabolic Health Foundation of India (WeMet India)

ONE WOMAN • ONE LIFE • ONE METABOLIC JOURNEY

Garg

idden Epidemic Demanding A

PCOS

Affecting millions of women in their reproductive years, acting as an early metabolic red flag.

Gestational Diabetes

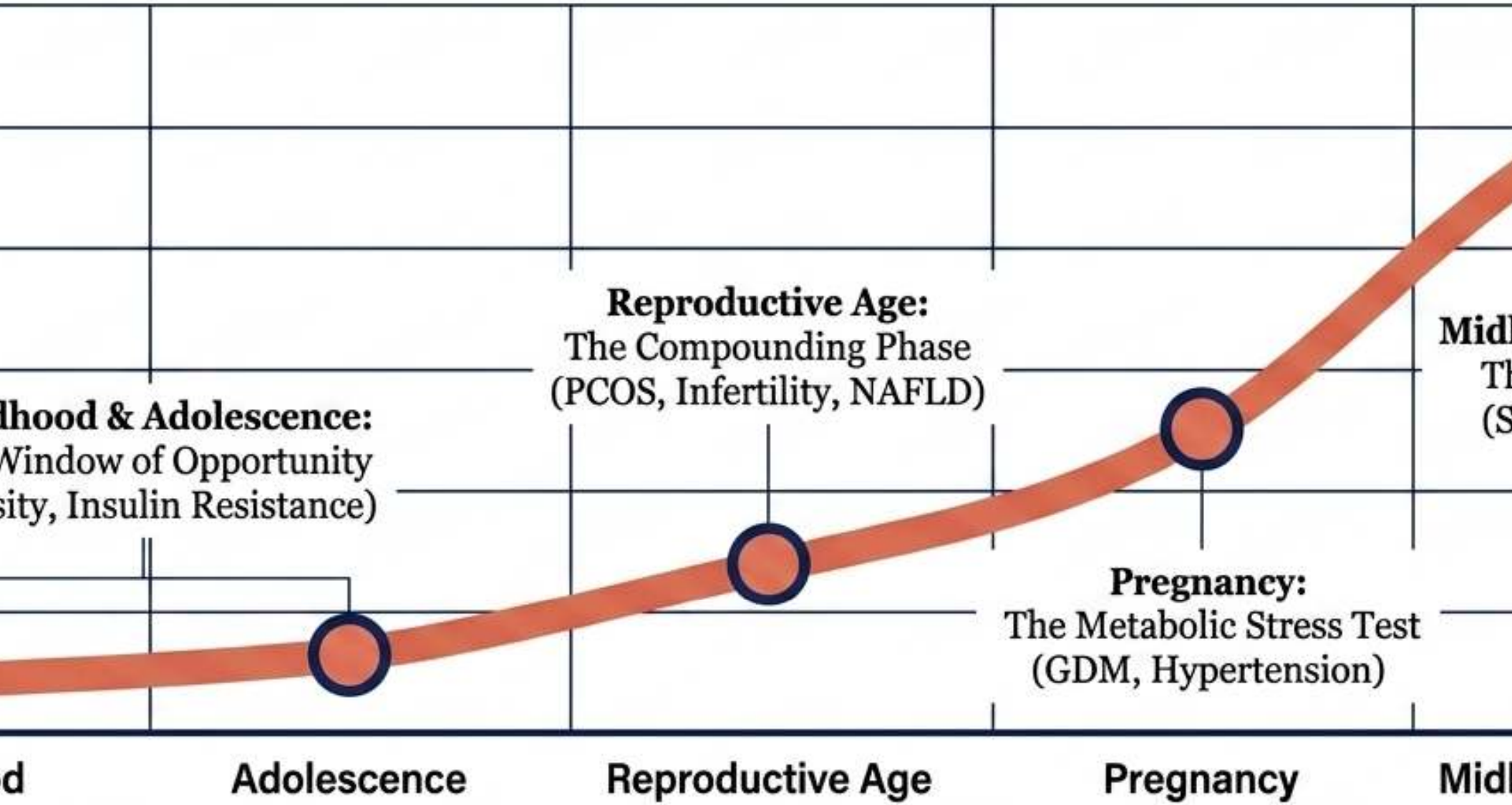
Functioning as a strong predictor and gateway to future Type 2 diabetes.

Cardiovascular Disease

Remaining the undisputed leading killer of women overall.

espite these intertwined risks, women's metabolic health remains severe
neglected in mainstream, siloed medical care

mpounding Trajectory of Metabo



eaway: Diseases do not spontaneously appear in adulthood; they beg
adolescence and compound across a singular life course

e 1: Adolescence &
Window of Opportunity

Manifestations

od obesity and early
resistance.

f early PCOS.

ual disorders.

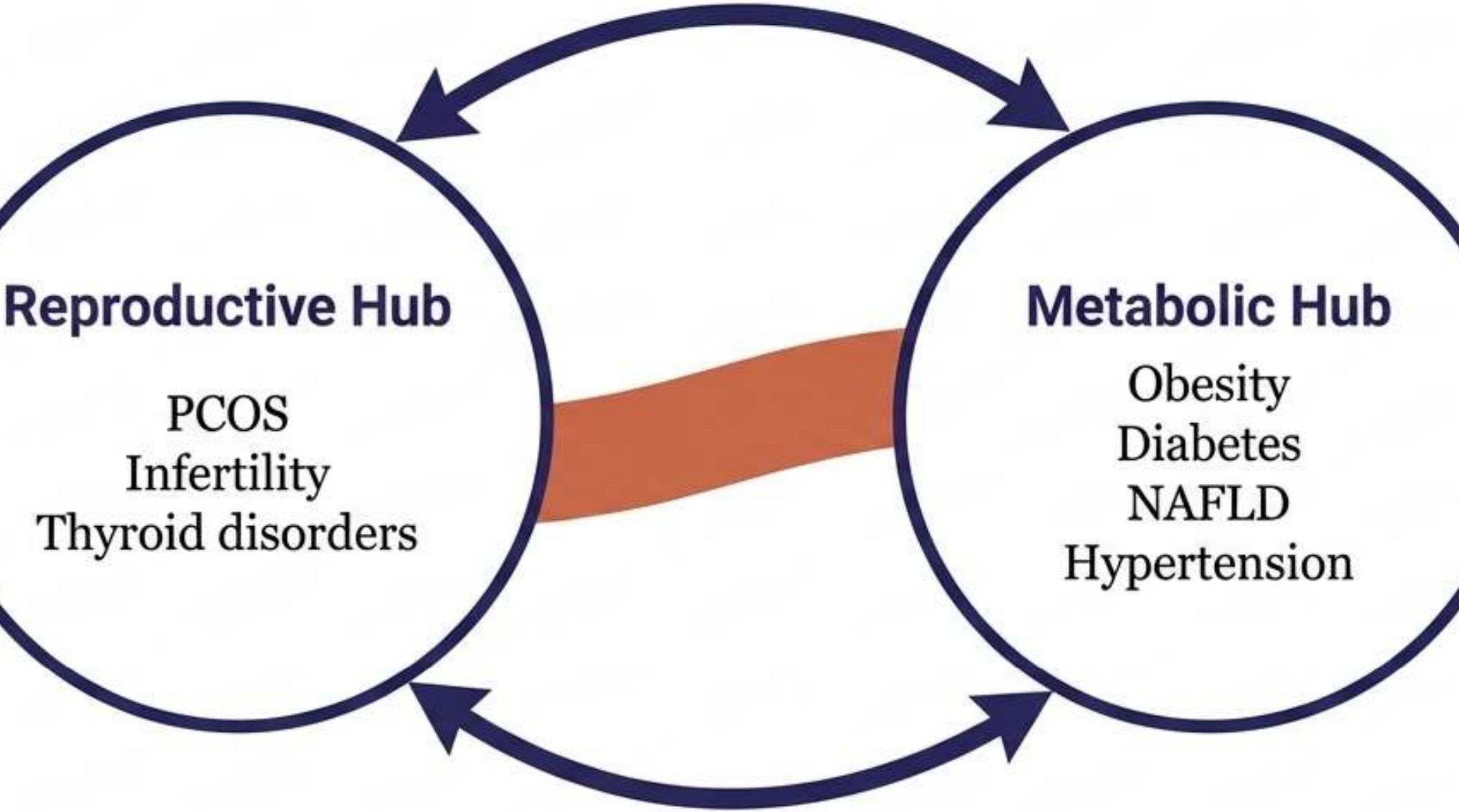
Collaborative Inte

Pedi
Gyn

Actionable Focus

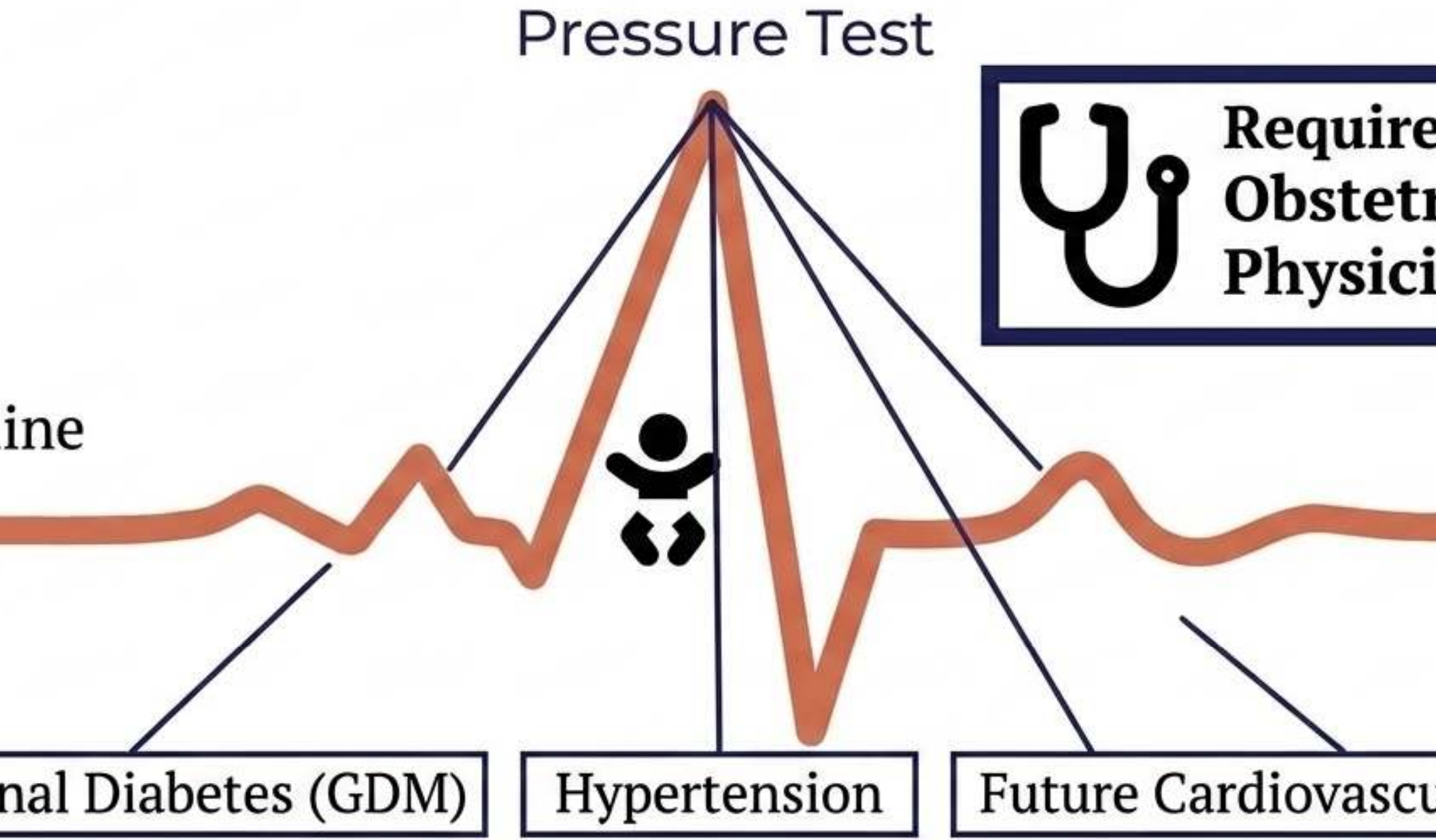
Physical foundations	Healthy nutrition
Menstrual health education	Early detection

Reproductive Years & Compounding C



Key Insight: Integrated management a
immediate fertility outcomes while sim

3. Pregnancy as a Metabolic Stres



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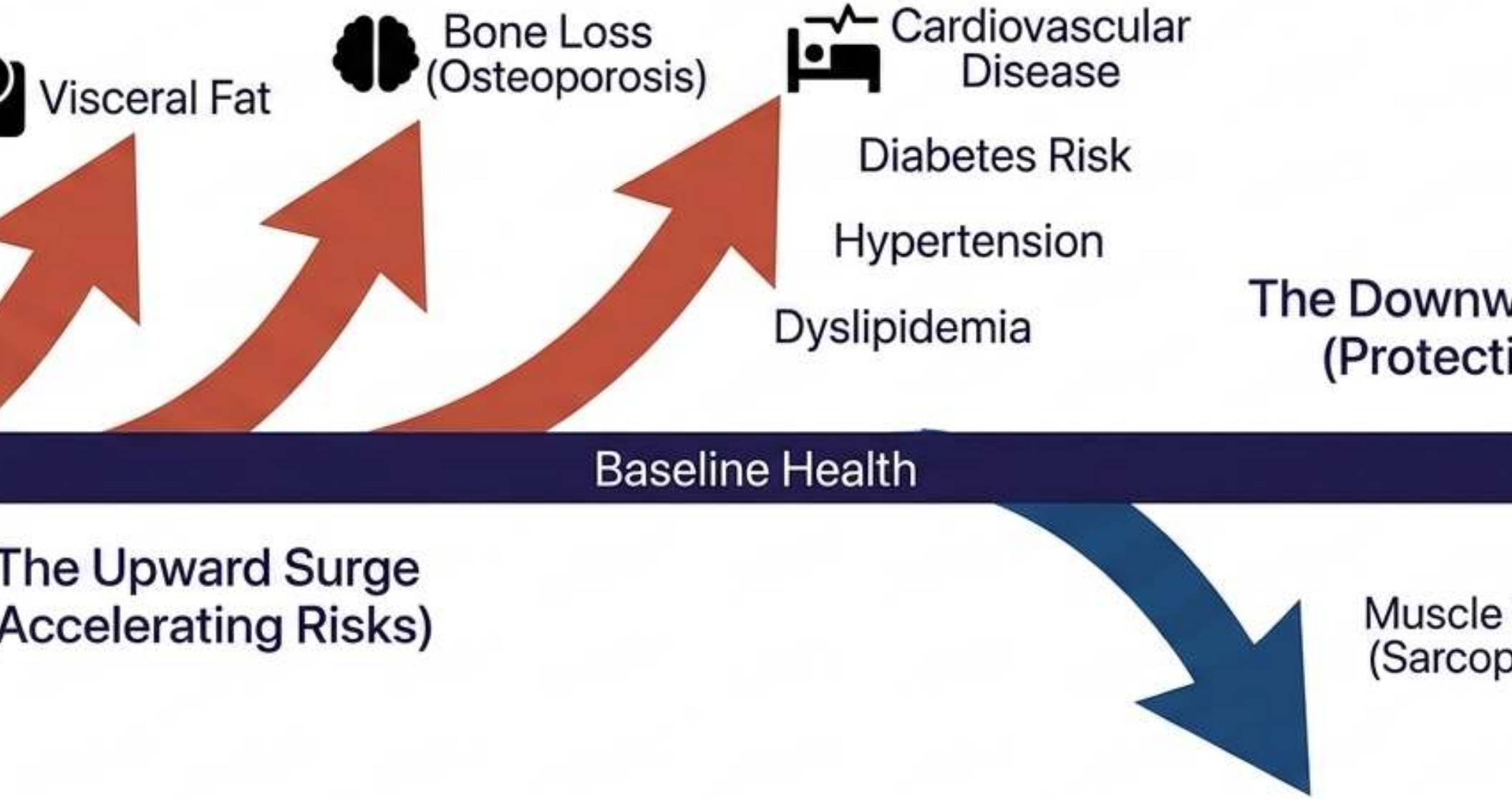
2. Immediate lifestyle intervention

3. Rigorous postpartum

4: Menopause & The Systemic Inv



e forgotten metabolic transition where multiple physiological syste
ift simultaneously, requiring urgent multi-disciplinary stabilizatio

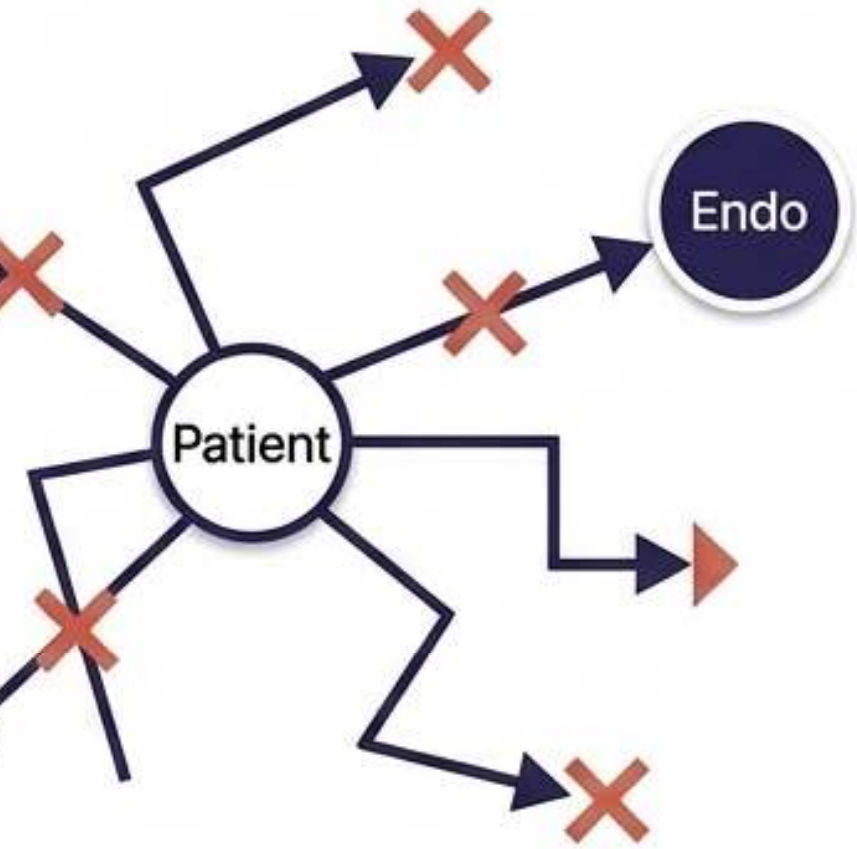
The Lifespan Risk Matrix

Stage	Primary Metabolic Stressor	Clinical Manifestations	Isola
/Adolescence	Insulin Resistance	Early PCOS, Obesity	P
oductive	Hormonal/Metabolic Imbalance	Infertility, NAFLD, HTN	G
gnancy	Acute Systemic Load	GDM, Preeclampsia	O
opause	Estrogen Depletion	Sarcopenia, CVD, Osteoporosis	Physici

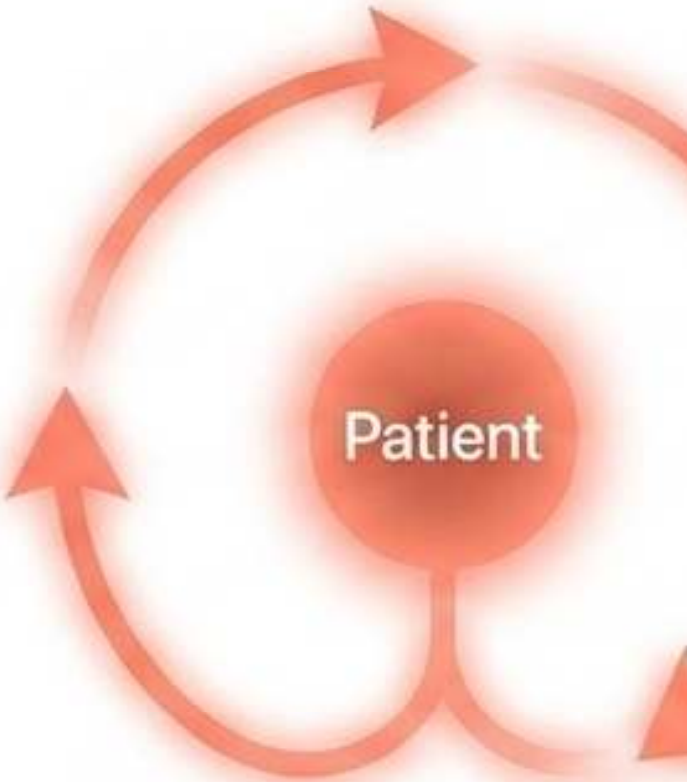
nic Flaw: Notice the vertical silos. The patient's biology is continuous acro
the medical system is horizontally fragmented. When a woman transition
Obstetrician to a Midlife Physician, critical metabolic data is lost.

hitecture of Care: Fragmentation vs. Inte

rent State (Fragmented)



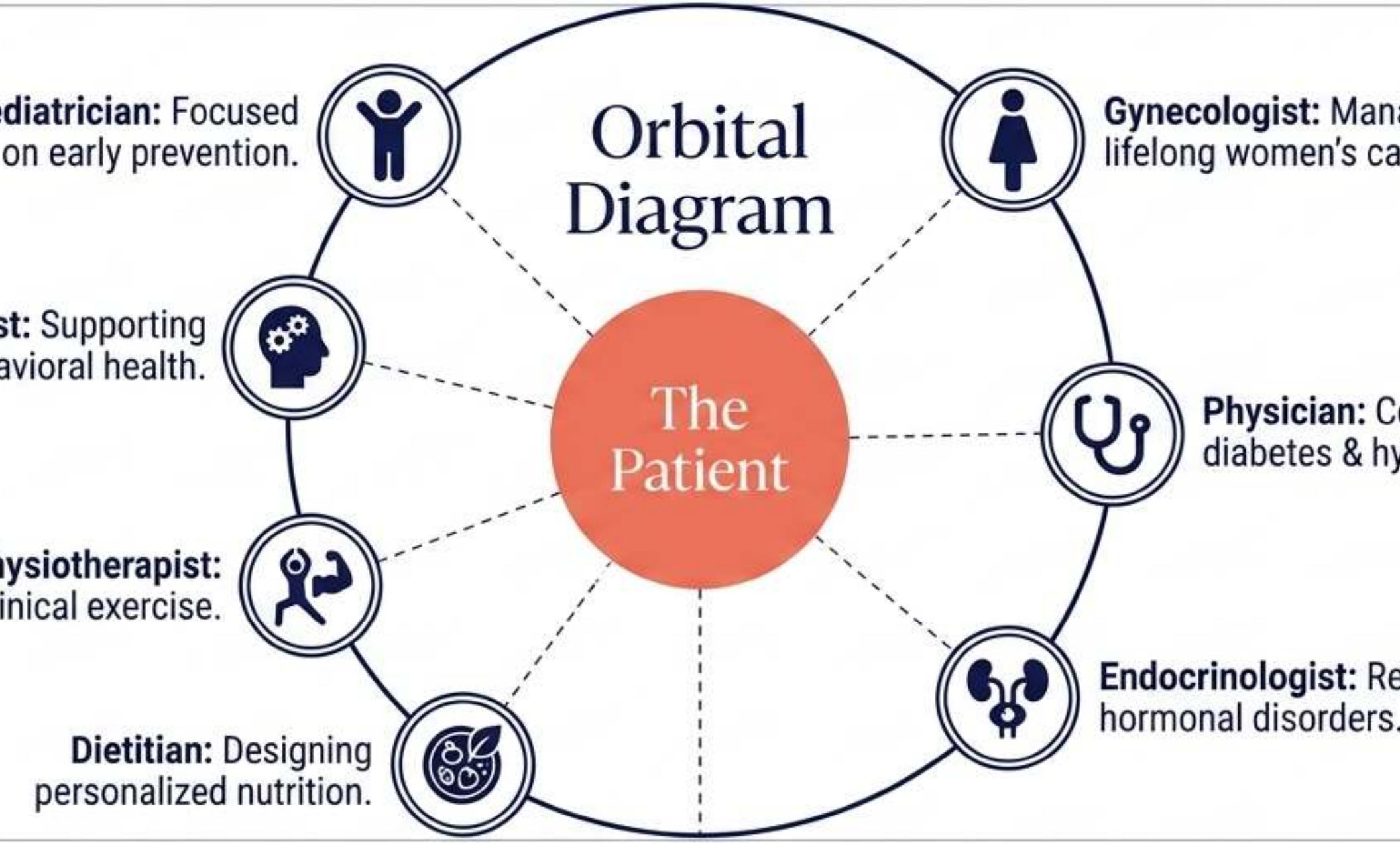
The Future State (Integrated W



Unified Data &
Collaborative Specia

We cannot treat a continuous metabolic lifeline with an episodic, siloed medical system.

aborative Care Hub: Seven Disciplines, One



Coordinated care prevents metabolic risks from slipping through the cracks between specialties

nslating Vision into National Pract

llar 1:
nal Education

conferences
CMEs

& Fellowship
grams

Pillar 2:
Clinical Practice & Research

- Developing Indian-specific practice guidelines

- Fostering institutional research collaborations

Pillar
Public Ad

- Targeted
educat

- Widespre
media cam

nent: To promote evidence-based care and build multi-disciplinary collaboratio

g the Evidence Base for the Indian Phe

nical Anomalies

gating Lean PCOS and
cent obesity specific to
uth Asian genetics.

Lifecycle Transiti

Long-term data trackir
Gestational Diabetes t
Menopause.

style Therapeutics

uating the efficacy of
ed, culturally relevant
style interventions.

Next-Gen Medici

Deploying digital health
AI in metabolic medicin
scale early diagnos

ublic Health Dividend of Early Interve

↓ Incidence of Type 2 Diabetes & CVD

↓ Rates of Infertility & Pregnancy Complications

↓ Prevalence of severe Osteoporosis

↓ Overall compounding Healthcare Costs

s: Investing in a woman's metabolic foundation exponentially
nstream chronic disease burden for the entire healthcare syst

ery Woman's Metabolic Health Matte

Healthy metabolism is the foundation of healthy womanhood—from adolescence to menopause.

ogether, we can transform women's health across generation