
Female heart attack patients fare better when treated by women doctors



New research findings highlight the importance of patient-physician gender concordance when it comes to caring for female heart attack patients. That's why Harvard Business School professor Laura Huang, who led the study, and her co-authors have this advice: If you're a woman and having a heart attack, do your best to make sure you're treated by a female physician. It's literally a matter of life or death.

The study included more than 500,000 heart attack patients admitted to hospital emergency departments in Florida between 1991 and 2010. A key finding is that female patients treated by male physicians were less likely to survive than patients of either gender treated by female physicians or male patients treated by male physicians. In addition, survival rates among female patients treated by male physicians improved with an increase in the percentage of female physicians in the ED and an increase in the number of female patients previously treated by the physician.

"These results," the authors write, "suggest a reason why gender inequality in heart attack mortality persists: Most physicians are male, and male physicians appear to have trouble treating female patients." The fact that gender concordance (that is, men treating men or women treating women) correlates with whether a patient survives a heart attack has implications for theory and practice:

- Medical practitioners should be aware of the possible challenges male providers face when treating female patients having a heart attack ("acute myocardial infarction" or AMI) – for example, a propensity among women to delay seeking treatment and the presentation of symptoms that differ from those of men.
- Although mortality rates for female patients treated by male physicians decrease as the male physician treats more female patients, this decrease may come at the expense of earlier female patients. Given the cost of male physicians' learning on the job, it may be more effective to increase the presence of female physicians in the ED.
- All this underscores the need to update the training physicians receive to ensure that heart disease is not simply cast as a "male" condition, which is often taken as conventional wisdom in both the media and the medical community.

Huang and co-authors conclude that there is still work to be done to understand the precise mechanism as to why gender concordance appears critical, particularly for female patients. "Such research might include experimental interventions, or tests of more targeted training, to examine how exposing male physicians more thoroughly to the presentation of female patients might impact outcomes," they say.

Future studies should examine the role played by residents, nurses, and other physicians who may be present or provide information to the supervising physician. Future work that considers these supporting figures "would advance our understanding of how coordination between [all] healthcare providers might influence the relationship between physician-patient gender concordance and patient survival," Huang and colleagues add.

Source: [Harvard Business School](#)

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