
Women Cardiologists: Lower Ranks, Lower Pay



According to a study led by Duke Medicine, there still exist major differences in pay and job characteristics between male and female cardiologists despite efforts to increase gender diversity in this segment. The findings were presented at the annual American Heart Association meeting and will be published in the *Journal of the American College of Cardiology*.

The study researchers analysed data from 161 cardiology practices in the U.S and evaluated their business practices, hours worked, types of work performed and pay rates.

The findings show that ranks of female cardiologists remain disproportionately small as compared to those in medicine overall. In addition, women in this particular field of medicine are less likely to specialise in higher-paying interventional procedures. Even after adjusting for the differences in the type of work performed by men and women, it was found that women earn less.

See also: [Sexism in Surgery](#)

Some specific findings include:

- Half of medical school graduates are women but women constitute only 12 percent of cardiology ranks.
- 53 percent of women specialise in general/non-invasive cardiology as compared to 28 percent of men.
- 80 percent of women work full time as compared to 91 percent of male cardiologists.
- Men continue to dominate interventional subspecialties with 39 percent of male cardiologists reporting an interventional subspecialty as compared to only 11 percent of women.
- Men earn more money even after accounting for differences in job description, practice setting and productivity.
- Due to different procedures, working hours and billing rates, men earn more - a median of approximately \$100,000 a year more for men than for women.
- Women in cardiology make around \$32,000 less per year as compared to males.

"These results recapitulate the salary differences that have been found among male and female physicians, lawyers, business executives, and others," said Pamela Douglas, MD, Geller Professor of Research in Cardiovascular Diseases at the Duke Clinical Research Institute.

See also: [Healthcare Gender Gap: 18% of Hospital CEOs Are Women](#)

Dr Douglas explains that there is a need for cardiology to be more welcoming to women and to acknowledge these differences in order to initiate measures that could correct them.

Reshma Jagsi, MD, associate professor at the University of Michigan and the study's first author points out that the differences in sub-specialisation and practice are noteworthy but she also explains that the differences in compensation cannot be fully explained by differences in subspecialty, procedures, or the many other personal, job, and practice characteristics.

This study did not evaluate why women choose general cardiology as compared to interventional subspecialty. It also does not explain the differences in the workload. However, the findings clearly show that there is a need to look into this gender gap because it seems that the cardiology segment is not fully utilising the talent pool of qualified professionals.

Source: [Duke Medicine](#)

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