

Study suggests gender does not play a role in risk of death from heart attack

February 22 2011, by Heather Guenther

A study led by the University of Michigan Cardiovascular Center shows being a woman may not increase your risk of dying from treatment for a severe heart attack.

U-M researchers and colleagues in the Michigan Cardiovascular Consortium found women who received treatment such as an [angioplasty](#) had higher unadjusted in-hospital heart attack deaths.

But these differences appear to be related to women's ages and additional health problems – not gender, says study lead author Elizabeth Jackson, M.D., M.P.H., an assistant professor of internal medicine at the U-M Health System and member of the Women's Heart Program.

"When we adjusted for factors such as age and co-morbidities like hypertension and diabetes, women had similar mortality rates at the time of the heart attack as men," says Jackson.

"But women still appear to be more likely to have a bleeding episode in the hospital that requires a transfusion or vascular complications," she says.

The five-year study published in the *American Heart Journal* showed that compared with men, women were older with more co-morbidities – a medical condition in addition to the primary disease – at the time of treatment.

Women account for about one-third of patients who undergo procedures such as percutaneous coronary interventions to clear the clogged arteries causing a heart attack.

Researchers examined the outcomes of 8,771 patients undergoing a procedure for an acute ST-elevation myocardial infarction, commonly known as a severe heart attack. Patients were part of the Blue Cross Blue Shield of Michigan Cardiovascular Consortium registry, a physician-led quality improvement collaborative that is supported by Blue Cross Blue Shield of Michigan and Blue Care Network.

Previous investigations using other registries have found women had higher in-hospital mortality rates than men, but recent advancements in treatment changed how doctors care for these patients and the team wanted to re-investigate with more current data, says Jackson.

"Overall, there have been tremendous improvements in the care of both men and women who suffer a [heart attack](#), but further research on everyday patients, such as those in the registry, is needed to be able to continue improving our level of care," says Jackson.

Cardiovascular disease kills nearly twice as many women in the United States than all types of cancer, including breast cancer, according to the American Heart Association.

February is American Heart Month and several initiatives – such as the American Heart Association's annual National Wear Red Day and the new "Make the Call, Don't Miss a Beat" campaign by the U.S. Department of Health and Human Services and its Office on Women's Health – aim to bring national attention to women's heart disease.

Also this month, the American Heart Association released its updated guidelines on preventing cardiovascular disease in women and Jackson

served on an expert panel that reviewed research and recommended changes.

More information: Journal reference: *American Heart Journal*,
[DOI:10.1016/j.ahj.2010.09.030](https://doi.org/10.1016/j.ahj.2010.09.030)

Provided by University of Michigan Health System

Citation: Study suggests gender does not play a role in risk of death from heart attack (2011, February 22) retrieved 3 May 2024 from <https://medicalxpress.com/news/2011-02-gender-role-death-heart.html>

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