

Men and women get sick in different ways

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At the dawn of third millennium medical researchers still know very little about gender-specific differences in illness, particularly when it comes to disease symptoms, influencing social and psychological factors, and the ramifications of these differences for treatment and prevention. Medical research conducted over the past 40 years has focused almost exclusively on male patients.

A new article titled "Gender medicine: a task for the third millennium" presents research on gender-related differences conducted by Giovannella Baggio of Padua University Hospital and her team.

The article, which appears in the Journal "Clinical Chemistry and Laboratory Medicine" (CCLM), highlights evidence for considerable differences between the sexes in five domains – cardiovascular disease, cancer, liver diseases, osteoporosis, and pharmacology.

Typically perceived as a male illness, cardiovascular disease often displays markedly different symptoms among women. While a constricted chest and pain that radiates through the left arm are standard signs of heart attack in men, in women the usual symptoms are nausea and lower abdominal pain. Although heart attacks in women are more severe and complicated, when complaining of these non-specific symptoms women often do not receive the necessary examination procedures, such as an ECG, enzyme diagnostic tests or coronary angiography.

Colon cancer is the second most common form of cancer among men



and women. However, women suffer this illness at a later stage in life. Furthermore, <u>colon tumors</u> typically have a different location in women, and they respond better to specific chemical treatments. Gender also has an impact on the patient's responsiveness to chemotherapy administered to treat cancer, such as colon, lung, or <u>skin cancer</u>. In this way, gender impacts the course of the disease and the patient's chances for survival.

Primary biliary cirrhosis is a liver disease that primarily affects women. The authors of the study provide clear evidence that for this disease and chronic hepatitis C, the genetic makeup and differing hormone levels of females are a primary risk factor. This finding also applies to osteoporosis. While typically viewed as a female disease because of the much higher rate of female patients, osteoporosis also strikes men. The study contends that osteoporosis is too often overlooked in <u>male patients</u>, and it documents a higher mortality rate among men suffering bone fractures.

Baggio and her team also show variation between men and women in the pharmacology of aspirin and other substances. Differences in action and side effects are attributable to different body types, varying reaction times in the absorption and elimination of substances, and a fundamentally different hormonal status. Thus, to administer medication safely and effectively, the dosage and duration of treatment must take the patient's gender into account.

The study concludes that additional and more far-reaching clinical investigations of gender differences are needed in order to eliminate fundamental inequalities between men and women in the treatment of <u>disease</u>.

More information: <u>www.degruyter.com/view/j/cclm....</u> <u>-0849.xml?format=INT</u>



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