

## Sex and race disparities in cardiovascular health could be reduced

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Substantial sex and racial gaps exist for cardiac rehabilitation referral at hospital discharge, especially among females, African-Americans, Hispanic and Asian patients leading to less favorable outcomes and/or survival rates.

Cardiac rehabilitation is recommended for all eligible <u>patients</u>, regardless of their gender or race yet referral rates at <u>hospital discharge</u> remain low. It is unclear whether inequality in cardiac rehabilitation referral is associated with patients' long-term survival.

Researchers linked the American Heart Association's Get With The Guideline Coronary Artery Disease (CAD) registry with Medicare claims data for 48,993 CAD patients from 365 hospitals across the United States between 2003 and 2009.

They found only 40 percent of eligible patients received a cardiac rehabilitation referral. Females were 12 percent less likely to receive cardiac rehabilitation referral compared with males. African-American, Hispanic, and Asian patients were 20, 36, and 50 percent less likely to receive cardiac rehabilitation referral than white patients.

According to the researchers eliminating inequality in cardiac rehabilitation referral at hospital discharge could potentially reduce long-term mortality. Specifically, 40 percent for women, 25 percent for African-Americans, 38 percent for Hispanics and 37 percent for Asian patients.



"It is now clear that inequality in cardiac rehabilitation referral practices are associated with patients' long-term survival. Eliminating the disparity in CR referral by adopting a policy of providing referrals to all cardiovascular patients at hospital discharge could potentially reduce the racial and gender disparity," explained corresponding author Shanshan Li, ScD, assistant professor of medicine at Boston University School of Medicine.

The researchers believe cardiac <u>rehabilitation</u> referral rates urgently need improvement and that nationally targeted CR quality improvement interventions should be supported.

These findings appear in the Journal of the American Heart Association.

**More information:** Shanshan Li et al, Sex and Racial Disparities in Cardiac Rehabilitation Referral at Hospital Discharge and Gaps in Long-Term Mortality, *Journal of the American Heart Association* (2018). DOI: 10.1161/JAHA.117.008088

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