

Treatment gap between men and women for stroke may have narrowed

June 10 2020



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While studies in the early 2000s showed that women were 30% less likely to receive clot-busting treatment for a stroke than men, a new analysis of recent studies found that the gap has narrowed to 13%, according to a meta-analysis published in the June 10, 2020, online issue of *Neurology*, the medical journal of the American Academy of



Neurology. The earlier analysis looked at research studies of clot-busting treatment, also called thrombolysis, published from 2000 through 2008; the new analysis examined 24 studies published between 2008 and 2018 and included over 1 million stroke patients.

"We are heartened that this treatment gap has narrowed, but more research is definitely needed into why a gap persists and whether it is continuing to get smaller," said study author Mathew Reeves, Ph.D., of Michigan State University in East Lansing. "This is especially important as additional treatments for acute stroke are developed and implemented."

Reeves noted that in actual numbers, the absolute difference in thrombolysis treatment rates between men and <u>women</u> was modest.

"Most of the studies showed differences of 0.5% to 1.0%," he said. "The largest difference in one study was 8.4%. Still, even small differences could translate into many untreated women given how common stroke is in the elderly population. These missed opportunities have greater consequences for women since they tend to have more serious disability and are more likely to die after a stroke than men, but importantly, have been shown to benefit just as much from treatment as men do."

One reason for the difference between men and women may be that women are much more likely to live alone, so they may arrive later at the hospital or not be aware of when their symptoms started compared to people who live with a partner.

"Clot-busting treatments must be given within a few hours of when the stroke occurred to be effective, so delays will make people ineligible for treatment," Reeves said.

Another reason may be that stroke in women can lead to atypical



symptoms, so the diagnosis may be more complicated or take more time, Reeves said. Women may be more likely to have non-traditional <u>stroke</u> symptoms such as a loss of alertness, weakness or incontinence.

Reeves said a limitation of the meta-analysis is that the studies differed in their methods and sampling, making it difficult to compare the results.

Provided by American Academy of Neurology

Citation: Treatment gap between men and women for stroke may have narrowed (2020, June 10) retrieved 7 May 2024 from

https://medicalxpress.com/news/2020-06-treatment-gap-men-women-narrowed.html

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