

Women were less likely to be diagnosed with COVID-19 at the start of the pandemic

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University of Alicante Professor of Preventive Medicine and Public Health María Teresa Ruiz Cantero has prepared a study based on COVID-19 and gender biases in health care and the inequalities revealing sex differences, recently presented as part of the [2022 Gender and Health Report](#) of the Spanish Ministry of Health, through the Women's Health Observatory (OSM is its acronym in Spanish).

Although the frequency of COVID-19 cases is higher in women than in men in Spain, according to the National Epidemiology Center as of June 2021 (47.77% men and 52.23% women), there is scientific agreement about a higher incidence of deaths in men, especially at the beginning of the pandemic. According to the UA researcher, we were able to see how [gender biases](#) were created in [health care](#) for a new pathology during 2020: COVID-19. The little health information by sex, the World Health Organization's definition of the disease focused on the most frequent respiratory involvement in men, and the lack of knowledge about other signs/symptoms, probably delayed early detection in those cases that presented with other clinical expressions more frequent in women.

Sex differences were published in the analysis of COVID-19 cases reported to the National Epidemiological Surveillance Network (RENAVE). In these reports, RENAVE highlighted the consistency of the significant differences by sex: although with a similar trend for fever and dyspnea in both sexes, cough, chills, pneumonia, [acute respiratory distress syndrome](#), other respiratory symptoms and renal failure are more frequent in men, while vomiting, sore throat and diarrhea are more frequent in women. In this sense, as Ruiz Cantero's study reports, the consensus on the higher mortality from COVID-19 in men has some gaps given the scarcity of statistics and clinical data in men and women on key variables related to the natural history of this disease.

Hospitalizations

In the report, Cantero states that the greater hospitalization of men compared to women may be related to their greater severity as they suffer more pneumonia, whose symptoms are the main criteria for admission. But early detection of COVID-19 in women may also have failed due to a lack of knowledge of the other forms of clinical manifestation that are more common in women.

Official figures from the Spanish Statistics Institute (INE) showed that during the lockdowns, more women with SARS-CoV-2 symptoms died without diagnostic confirmation due to lack of access to diagnostic tests and deficient health care services, while more men died from COVID-19 with confirmed diagnostic tests. The greater therapeutic effort involved in hospitalizations and ICU admissions in men is mainly related to severity. However, Ruiz Cantero pointed out that ICU admissions are lower in deceased women than in deceased men, where the severity is the same for outcome purposes. Like many other gender biases in health care, there is a pattern of male baseline knowledge of the disease that applies to women.

Methodology and recommendations

In order to carry out the analysis, the UA researcher carried out a longitudinal and cross-sectional study stratified by sex of a total of 1,771,543 men and 1,936,299 women diagnosed with COVID-19. Such a large number allows us to obtain new knowledge, as well as an unprecedented vision of the behavior of this viral disease according to sex.

The University of Alicante Professor in Preventive Medicine and Public Health insisted on the relevance of including the sex/gender perspective in the information policy on [public health](#) emergencies in order to improve their quality and transparency. To this end, it is essential to provide a comprehensive training for health care professionals and managers and epidemiological surveillance centers or institutions, including knowledge of gender innovations applied to good professional practices.

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