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## Women half as likely to get proper heart care in Australia

**Research shows women are also twice as likely as men to die**

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Women who suffer a serious heart attack are half as likely to receive proper treatment in an Australian hospital as men, and twice as likely to die six months after they're discharged, new research says.

The study conducted by cardiac specialists and researchers from across Australia examined the treatment received by men and women who suffer ST-elevation myocardial infarction (Stemi), a particularly lethal type of heart attack that involves a sudden and complete blockage of blood to the heart.

Using data from 41 hospitals around the country, the researchers found men who were admitted following a heart attack were twice as likely to receive the appropriate diagnostic tests and treatment as their female counterparts. Women were also less likely to be prescribed preventive medications or be referred for cardiac rehabilitation.

And six months after being discharged, women were twice as likely to die or suffer further heart problems, the data showed. That included all causes of death, but predominantly heart attacks, the researchers said.

"I was quite surprised with the findings," said University of Sydney professor Clara Chow, a cardiologist at Westmead hospital and the study's senior author. "Women with serious heart attacks are being undertreated and it's just not acceptable."

Chow told Guardian Australia that while there was no conclusive cause of the discrepancy, she suspected that an "unconscious bias" in the health system was likely to be a factor.

That meant women were less likely to believe that they were at risk of dying from a heart attack, and that medical professionals may be less likely to provide appropriate care as a result.

Cardiovascular disease is the leading cause of death among both men and women around the world but women who suffer Stemi are at greater risk, according to Chow.

She said the researchers had known that previous research had also shown a discrepancy in the treatment received between men and women, but those studies had not controlled for the different outcomes caused by various heart attacks.

The researchers chose to focus only on patients who had presented with a Stemi because it was a common heart attack that “everyone knows how to treat”. Presentation and diagnosis is fairly consistent, and patients should receive a standardised management plan, Chow said.

Given there is no difference in the treatment protocols for men and women, the researches had figured in “modern-day Australia we shouldn’t have differences in outcomes”.

The study used data compiled from 2,898 patients (2,183 men, 715 women) who were admitted to 28 metropolitan and 13 rural hospitals between 2009 and 2016. The average age of women in the study was 67, while for men it was 61.

While the researchers believe more studies are needed to identify the causes for the discrepancy in treatment, Chow said any unconscious bias could be addressed immediately simply by informing people of the problem.

She added that hospitals that participated in such studies were usually among the best performers, meaning it was “highly unlikely [the problem] has been underestimated”.

“There might be places that this [discrepancy] is even worse,” she said. “That’s what I’m worried about.”

A study from Australian Institute of Health and Welfare released last week showed nearly 11,000 men and about 8,200 women died from coronary heart disease in 2016.

The study was published in the Medical Journal of Australia on Monday.

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