**Have a heart: No surgery for girls with cardiac ailments?**

* **Priyanka Vora and Rhythma Kaul, Hindustan Times, Mumbai**

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Dr Snehal Kulkarni, a paediatric cardiologist in Mumbai, was shocked when a man recently told her that he would rather dump his granddaughter in a dustbin than get her treated for her heart ailment.

“When I told the family she needs a surgery, the grandfather plainly refused,” said Dr Kulkarni, who, along with her team, collected funds for the surgery to fix the hole in the child’s heart. “She is completely healthy now.”

Other doctors treating children with heart conditions are not surprised, as boys often get preference while treating children with heart conditions. A study published in Heart Asia -- a journal associated with the British Medical Journal (BMJ) -- found only four out of ten children operated upon for heart defects were girls, indicating a deep-rooted gender bias. “Even with free treatment, girls comprised only 37% of the total patient population,” said Dr Shibba Thakkar Chhabra, lead author of the study.

The study looked at 537 children, who were brought to Dayanand Medical College and Hospital in Ludhiana, Punjab, for advanced management of congenital heart diseases or rheumatic heart disease. Of the 519 children who underwent a surgery, 62% were boys. “Ideally, we should be seeing almost an equal number of boys and girls, which is clearly not the case,” said Dr Chhabra.

Dr Kulkarni said only 50%-60% of girls, who require a heart surgery will get help, while the rest will be left untreated. “If we counsel 10 parents with sons, all or at least 90% of them will get their child operated upon,” said Dr Kulkarni, adding a boy is treated like a “prince”.

The situation is the same in hospitals in Delhi. Although no recent data is available with hospitals, according to the data collated by New Delhi’s All India Institute of Medical Sciences (AIIMS) published in 2011, a significant gender bias existed in the acceptance of pediatric cardiac surgery. Of the 100 boys and girls with congenital heart defects, around 70 boys undergo an operation for every 22 girls.

“Ours is a referral centre, but still there is disparity,” said Dr VK Bahl, professor and head, department of cardiology, AIIMS, who is one of the authors of the study that was published in BMJ.

For the study, parents or guardians of 405 children aged up to 12 years, who had been advised to undergo elective pediatric cardiac surgery, were interviewed. The status of the patients was reviewed after a year and the factors associated with non-compliance with treatment were analysed. Of the patients studied, 44% of girls had undergone surgery in one year compared to 70% of the boys. Among the reasons why parents decided not to get the surgery done were gender, lower socioeconomic classes and higher cost of surgery.

The bias against the girl child is an untold truth in clinics run by paediatric heart specialists. Dr Mamta Manglani, professor and head, department of paediatric s at the municipal corporation-run LTMG Sion Hospital, Mumbai, said gender bias is more pronounced among families with lower education levels. “Sometimes, parents don’t bring their daughters to hospitals, even after identifying their health problems,” said Manglani.

Usually, parents ask queries pertaining to the surgery, but when it comes to parents of a girl child, they are worried whether the operation will affect her ability to bear a child, said doctors. “Parents tend to ask us if she will be able to bear children after the surgery,” said Dr Shreepal Jain, paediatric cardiologist Sir HN Reliance Hospital, Mumbai.

Another worry for parents is of the scars left after the surgery. “It is challenging for a girl who has undergone a heart surgery in childhood to find a groom. However for boys, the math is different,” said Dr Jain.

While boys outnumber girls when it comes to reaching hospitals, the situation in the community is different. A survey of children with congenital heart diseases conducted by Surana Hospital in Mumbai showed a more girls were in need of a heart surgery. “We went to villages in Nagpur and Jalgaon to examine children who require heart surgeries and 60% of those who needed surgical intervention were girls,” said Dr Prince Surana, CEO of the hospital, adding families consent to get their daughters operated upon only when we offer them free treatment and transportation to the hospital.

Even as doctors said bias is stronger in northern parts of the country, girls in the south, too, suffer from discrimination. “There is a minimal gender bias that we see in southern parts of India also,” said Dr Krishnakumar R, head at the department of paediatric cardiology, School of Medicine, Kochi, who has worked in Delhi, Maharashtra and Kerala among other regions in India. “Although the sex ratio in Kerala favours girls, we still see more boys brought to our clinics for surgery.”

Dr Krishnakumar R said even if the treatment is free, the indirect expenses and loss of wages influence parents’ decision.

Doctors said untreated birth defects of the heart could also prove fatal and are one of the contributing factors for infant mortality in India. The gender bias, doctors said, is not restricted to paediatric healthcare alone. “It is only in the Indian subcontinent where we see preferential treatment towards boys,” said Dr Ramakrishnan Sivasubramanian, department of cardiology, All India Institute of Medical Sciences, who has studied the sociological factors that impact a parent’s decision to treat their child. “The current paper shows even free treatment is not enough to lure parents to get their daughters operated. Perhaps, we need a scheme where parents are given an incentive if their daughters live longer.”

Doctors said discrimination against girls with heart diseases could be declining. Dr KK Talwar, former director of Postgraduate Institute of Medical Education and Research, Chandigarh, who is currently heading the cardiology division at Max Healthcare, Delhi, said, “Times are changing. With education, people’s perspective is also seeing a change. The discriminatory behaviour is mostly found in very poor people with limited means.”

(Inputs from Aayushi Pratap)