

Men more likely to receive implantable defibrillators

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Men Are Likelier to Receive
Heart Devices, Studies Show
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WASHINGTON -- Men are much more likely than women to receive an implantable defibrillator to prevent sudden cardiac death, according to two studies led by Duke University researchers.

One of the studies, however, suggests that more than 60% of heart-failure patients who fit the criteria to receive the device don't receive it, regardless of gender or racial differences. The studies will be published today in the Journal of the American Medical Association.

One of the studies looked at Medicare patients and was based on Medicare claims records from 1991 to 2005. Most of the analysis was based on the period from 1999 to 2005, which researchers said coincided with an expansion in Medicare coverage for the devices.

Defibrillators are designed to deliver electrical shocks or pulses on an as-needed basis to help a malfunctioning heart beat properly. Defibrillators are designed to treat a heart that beats too fast, while a similar device, a pacemaker, is designed to pace a heart that beats too slowly.

The market for implantable defibrillators is dominated by three companies: Medtronic Inc., St. Jude Medical Inc. and Boston Scientific Corp. The companies have been fighting to recharge a U.S. market that was damaged by device recalls in 2005 and to figure out why many patients at risk for sudden cardiac death still don't get the devices.

Patients with certain heart problems -- such as heart rhythm disorders or heart failure, in which a damaged heart muscle doesn't properly pump blood -- can be eligible to receive the devices in order to prevent death. Patients who have already had a problem, such as a heart attack, might also be eligible for the devices in order to prevent a recurrence.

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The Medicare study, which involved more than 200,000 patients, looked at various subgroups of patients, but found that, overall, men received the defibrillators at rates of two to three times as high as women. The study was funded by a unit of the National Institutes of Health.

One of the study authors, Adrian Hernandez, who is also a cardiologist at Duke, based in Durham, N.C., said part of the difference could be that some of the women had a type of heart failure that isn't typically treated with a defibrillator and is more common in women than men.

Dr. Hernandez explained that the Medicare claims database didn't detail the type of heart failure among patients. Still, he says, any difference in the type of heart failure isn't enough to account for the entire gap between men and women.

Because of the limitations of looking only at Medicare claims data, Dr. Hernandez and other researchers looked at a group of patients in the second study who are part of an American Heart Association campaign to have hospitals follow proper guidelines for treating heart-failure patients. The campaign is funded in part by GlaxoSmithKline PLC, researchers said, and the study itself was funded by an American Heart Association pharmaceutical roundtable grant.

That study looked at 13,034 patients admitted to 217 hospitals in January 2005 to June 2007. All of the patients had heart failure and left ventricular ejection fraction of 30% or less, which is a measure of how well the heart pumps blood. Such patients are eligible to receive a defibrillator in most cases.

The study showed that 4,615 patients, or 35.4% of eligible patients, had the defibrillators at hospital discharge or had plans to have one implanted. The study also showed that women were about 40% less likely to receive a defibrillator than men and that black patients were 30% less likely to receive the device than white patients.

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