Men and Women Not Equal In Health Needs and Care

here's been a growing awareness in recent years that women's health differs in many respects from that of men. Women live longer, are sick more often, and are more susceptible to some disorders while less vulnerable to others. Women often receive different medical care for the same diseases and their responses to certain drugs may be unlike a man's.

The divergent pictures of men's and women's health were explored at the Institute of Medicine's annual symposium last October. Developing the theme "Gender Differences in Health," some speakers discussed the physical, social, and psychological variances between men and women that might help account for health differences, while other participants addressed health care and public policy implications.

Women have a survival advantage over men that begins at infancy. Epidemiologist Maureen Henderson of the University of Washington, Seattle, pointed out that deaths among boys during the first year of life are more than 25 percent higher than among girls. Studies show that girls' immune systems respond more strongly to vaccines and girls are less susceptible to infection.

Once they are mature, however, women experience more sickness than men. They spend more time disabled in bed, lose more work days to sickness, and visit doctors more often. The greater number of illnesses experienced by women may be explained in part by the caretaker role they often assume in life, suggested Henderson. These responsibilities expose them more to sick children and other relatives. A woman's heftier immune defenses apparently aren't enough to overcome this higher exposure to disease. An overzealous immune system, however, may explain why women are more susceptible to autoimmune disorders - arthritis, for example.

On average, women live seven years longer than men, but, according to Henderson, that's not all good news. "It's a horrible travesty that women are



living longer, but taking longer to die." An analysis of the sickness and disability experienced by women late in life led to the conclusion that "the extra seven years can be whittled down to three good years."

More research is needed on what makes women frail late in life and what can be done to prevent disability. One possibility is that women don't exercise enough. Fewer than onethird of women aged 45 and older exercise regularly, Henderson said. Some people have speculated that the recent influx of women into the work force would equalize life expectancy for men and women by subjecting women to the same stresses men experience on the job. On the contrary, not only have women held on to their survival edge, but a recent study suggests that working outside the home may be improving their health. That study pinpointed social isolation and monotony as predictors of heart disease in women homemakers.

Childhood Behaviors

Other social and psychological factors may help explain gender differences in health. Certain eating disorders and depression are more common in women; accidents, stabbings, and gunshot wounds are more common in men. All of these health disruptions have their roots in behavior, noted Stanford University psychologist Eleanor Maccoby. The behavior of the two sexes differs dramatically starting in childhood.

Studies of children interacting on the playground reveal that boys are more concerned with dominance — who is tougher. Playing into the dominance theme, boys often pretend to be superheroes engaged in conflict and rescue. Girls, on the other hand, tend to steer away from such roles and treat each other more equally.

As boys get older, their efforts to

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establish their toughness can take the form of daring games or rule-breaking behavior such as smoking and drinking. These risk-taking displays, as well as the jockeying for power, continue into adulthood, research suggests. "When young men quarrel over even a minor issue," said Maccoby, "if they believe it involves their status or turf, neither will back down and escalation of conflict rapidly occurs." This may

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explain why men are more likely to have violent or accidental deaths.

Because adolescent boys gain status with male peers by being seen with a beautiful girl, Maccoby adds, a partner's physical appearance is more important to males than to females. This translates into the extraordinary concern of adolescent girls to be attractive.

Depression

Women are more likely than men to develop depression. This propensity doesn't appear until after age nine, according to psychologist Ellen Frank of the University of Pittsburgh School of Medicine. She suggested two factors that might work together about this age to make females more susceptible to depression: an elevated need for sleep and greater vulnerability to sexual abuse.

Children at about 10 or 11 years of age begin to stay up later, according to Frank. This means that many girls probably don't get enough sleep. Studies show that when volunteers are allowed to set their own sleep schedules, women sleep one-and-a-half more hours a day than men.

This lack of sufficient sleep might lower girls' resistance to depression, Frank suggested, especially if they encounter psychologically disturbing experiences — sexual assault, for example — at about the same time. Studies show that the more childhood sexual abuse a person experiences, the greater the chances for developing depression, according to Frank.

Heartfelt Differences

When it comes to coronary artery disease, differences between men and women are complex. Although heart disease has traditionally been viewed as a man's problem, it is a major cause of death in women, said cardiologist Nanette Wenger of Emory University School of Medicine. Men tend to develop life-threatening heart disease at an earlier age, she pointed out, but after the age of 60, a woman's risk of suffering a heart attack after experiencing angina pain equals that of a man's. The risk of dying from such an attack is greater in women.

Despite these disturbing figures, testing for heart disease is more common for men than women. Moreover, prevention or treatment strategies such as regular exercise, heart bypass surgery, or clot-dissolving drugs following a heart attack are pursued less often in women than in men.

Looking beyond cardiology, women are still less likely to get their health care needs met, pointed out Nancy Fugate Woods of the University of Washington School of Nursing. Because women are more likely than men to hold part-time or unskilled jobs, they are less likely to receive health insurance as an employment benefit. Furthermore, women who do receive health coverage with their jobs often lose it when they take maternity leave. More men than women, consequently, have private health care insurance.

Even if women are insured, they often find their coverage excludes the type of care they especially need such as abortion, family planning, and pregnancy, delivery and postpartum care. Most health care policies also omit nursing home care or home health care, yet eight out of every 10 elderly people needing such care for five years or more are women, Woods noted.

Excluded from Research

Women are often excluded from medical research, said Ruth Kirschstein, director of the National Institute of General Medical Sciences. Much of what is known about such major killers as coronary artery disease, AIDS, or trauma, for example, is based on studies done primarily on men.

Likewise, little is known about the unique effects various drugs might

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have in women because women often are not included in drug tests. As a result, clinical recommendations for women usually are based on findings from studies done on men, added Harvard Medical School epidemiologist Charles Hennekens. Studies on women, however, will require commitment of additional resources to enroll the necessary additional numbers and to conduct the subpopulation analyses.

Women of childbearing years are often excluded from drug testing because of concern that they might be pregnant and the drug could harm their unborn children. But this exclusion "wipes out all women from ages 10 to 50 [from drug testing]," lawyer Nancy Buc charged, "and doesn't take into account the possibility of contraception, that some women are celibate, and that you can test to see if a woman is pregnant."

Neither has the distinctive information needed for proper medical care of women been adequately addressed by the nation's research agenda, several speakers at the conference pointed out. They said that more research needs to be done on fertility and contraceptive devices, menopause and estrogen replacement therapy, vaginal viricidals, and the disabling disorders that women are especially susceptible to because of their longevity.

Responding to the need for more studies on women, the National Institutes of Health (NIH) recently established an office of research on women's health. This office was given a mandate to insure that research conducted and supported by NIH appropriately addresses issues regarding women's health, and that there is appropriate participation of women in clinical trials. "The opportunities for research on women's health are greater than ever," summed up Kirschstein, but "closing the gaps in knowledge of women's health may take several years of intensive effort."

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