

Excess Mortality Among Women Undergoing CABG Surgery

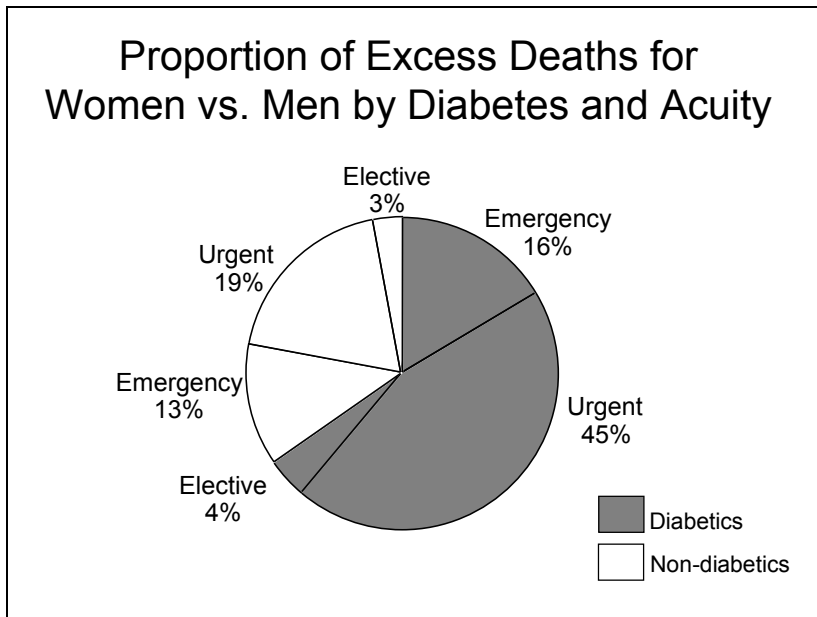
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Authors: GT O'Connor, JR Morton, EM Olmstead, YR Baribeau, MP Fillinger, WE Cohn, F Hernandez, MC Norotsky, JH Sanders, PN Uhlig

Background: Since the first reports of CABG surgery it has been noted that women had a higher risk of operative mortality than did men. The goal of this study was to identify the patient groups in which this excess risk occurs.

Methods: Data were collected on 26,725 consecutive patients undergoing isolated CABG surgery in northern New England between 1993 and 2000. We conducted stratified analyses by age, acuity, and diabetes. Acuity was classified as elective, urgent (acute coronary syndrome) or emergency (hemodynamically unstable). Within each of these strata we calculated the rates of death for men and women and calculated the female-male risk difference and the percent of excess risk in each patient category. Excess risk is defined as the difference in the mortality rates between women and men in each stratum examined.

Results: The overall in-hospital mortality rate was 2.9%, among men it was 2.4% and among women it was 4.1%. There were 17.6 excess deaths/1000 among women. Overall 97% of the excess mortality among women was among diabetics or among patients with an urgent or emergency presentation. Absent diabetes or an acute presentation, advanced age contributed relatively little to the excess risk among women.



Conclusion: These findings suggest that the tight control of blood glucose during the perioperative period and excellent medical treatment of acute coronary syndrome, particularly among women, may be important targets for process improvement.