Gender Differences in Patients Undergoing Surgery for Acute Type A Aortic Dissection in the UK by Mohamad Bashir | Amer Harky | Benjamin Adams | Consortium of surgeons | Aung Oo | Rakesh Uppal

OBJECTIVES:

To investigate the impact of gender on preoperative characteristics and postoperative outcomes in patients undergoing acute type A aortic dissection (ATAD).

METHODS:

Between 2007-2013, patients with ATAD were checked. Univariate comparisons of pre-operative and operative characteristics were performed. Multivariable analyses to assess gender’s effect upon in-hospital and 5-year mortality.

RESULTS:

1386 patients (446 (32.2%) women and 940 (67.8%) men). Female patients were: older (median age = 67 vs. 61; \( P < 0.001 \)), a lower BMI (25.4 vs. 26.9; \( P < 0.001 \)), likely to have respiratory disease (14.6% vs. 19.3%; \( P = 0.003 \)), likely to have LVEF \( \leq 50\% \) (75.3% vs. 69.6%; \( P = 0.027 \)), need pre-operative IV nitrates (11.0% vs. 15.0%; \( P = 0.042 \)), to have concomitant CABG (16.4% vs. 11.5%; \( P = 0.012 \)), less likely to have an operation that involved the arch segment of the aorta (9.0% vs. 14.5%; \( P = 0.004 \)) with shorter operation times (median CPB time = 188.5mins vs. 202mins; \( P = 0.014 \), median AXC time = 101mins vs. 106mins; \( P = 0.039 \)) than men. Operative mortality was similar between the groups (16.8% vs. 18.2%; \( P = 0.53 \)). Logistic regression showed that gender had no effect on in-hospital mortality (OR (95% CI) for female (0.72 (0.46, 1.15); \( P = 0.17 \)), and Cox proportional hazards showed that gender had no effect on mortality at 5 years (HR (95% CI) for female gender = 0.78 (0.57, 1.06); \( P = 0.11 \)).

CONCLUSIONS:

Gender has no effect on in-hospital or 5-year mortality in patients with ATAD repair.