



Published Secondary Study: Associations between gender and cardiac arrest outcomes in Pan- Asian out-of-hospital cardiac arrest patients

Dr Yih Yng Ng

Clinical paper

Associations between gender and cardiac arrest outcomes in Pan-Asian out-of-hospital cardiac arrest patients[☆]



	Unadjusted OR	Adjusted OR [^]	Unadjusted OR	Adjusted OR [^]	Unadjusted OR	Adjusted OR [^]
Female versus male						
	Overall		(18-44 years)		(≥ 55 years)	
ROSC at scene or ED	0.56 (0.52-0.61)*	1.01 (0.88-1.16)	1.09 (0.83-1.44)	2.11 (1.27-3.52)*	0.56 (0.52-0.61)*	1.01 (0.87-1.17)
Survival-to-admission	0.86 (0.82-0.91)*	1 (0.92-1.09)	1.16 (0.91-1.48)	1.74 (1.19-2.54)*	0.86 (0.82-0.91)*	0.8 (0.7-0.91)*
Survival-to-discharge	0.48 (0.43-0.52)*	0.94 (0.77-1.15)	1.01 (0.77-1.32)	1.82 (1.11-2.97)*	0.47 (0.42-0.52)*	1.04 (0.87-1.23)
Good cerebral performance	0.41 (0.36-0.46)*	0.88 (0.62-1.25)	0.85 (0.6-1.19)	1.82 (0.93-3.57)	0.4 (0.34-0.46)*	0.95 (0.73-1.24)
Good overall performance	0.39 (0.33-0.46)*	1.04 (0.76-1.42)	0.89 (0.61-1.3)	3.32 (1.27-8.66)*	0.39 (0.33-0.46)*	1.04 (0.76-1.42)

[^]adjusted for significant covariates in univariate analysis (age, gender, location type, medical history, arrest witnesses status, bystander CPR, initial arrest rhythm, prehospital defibrillation, prehospital airway, drug administration, response time)

Key Findings

- After stratifying for menopausal status and adjusting for other demographic factors and resuscitation related factors
 - women of 18-44 years old were more likely to have ROSC at scene/ED, survive to admission, discharge and have better overall performance
 - Women >55 years old were found to have lower survival in the initial analysis, but after adjusting for resuscitation factors, there was no overall difference