

**HFSA 4th Annual Scientific Meeting
Accepted Abstract September 2000
Heart Failure Society of America**

Gender Based Differences: In-Patients Referred for Intensive Outpatient Heart Failure Management.

Background: There is limited data characterizing the effect of gender on referral and outcomes in female patients with advance NYHA Class III and IV heart failure.

Methods: We evaluated the patients' characteristics and outcomes for 52 patients referred for inotropic infusion treatment to our heart failure clinic.

Results: 37 males (71%) and 15 or (28%) females were referred for treatment. Mean age of males was 68, females 72. NYHA Class III consisted of 7 females and 21 males with 8 females and 16 males in Class IV. Mean ejection fraction was 27% for both groups. Mean length of follow-up was 7 months. Presence of co-morbid factors (diabetes mellitus, hypertension, coronary artery disease and COPD) was 80% for females and 100% for males referred. Overall mortality for males was 15% and 3% for females.

Conclusion: Fewer females were referred for outpatient heart failure management suggesting possible under-diagnosis or under appreciation of severity of disease appropriate for referral. An alternative explanation may be that fewer women survive their disease process such that long-term management of advance symptoms does not become a factor in their care.