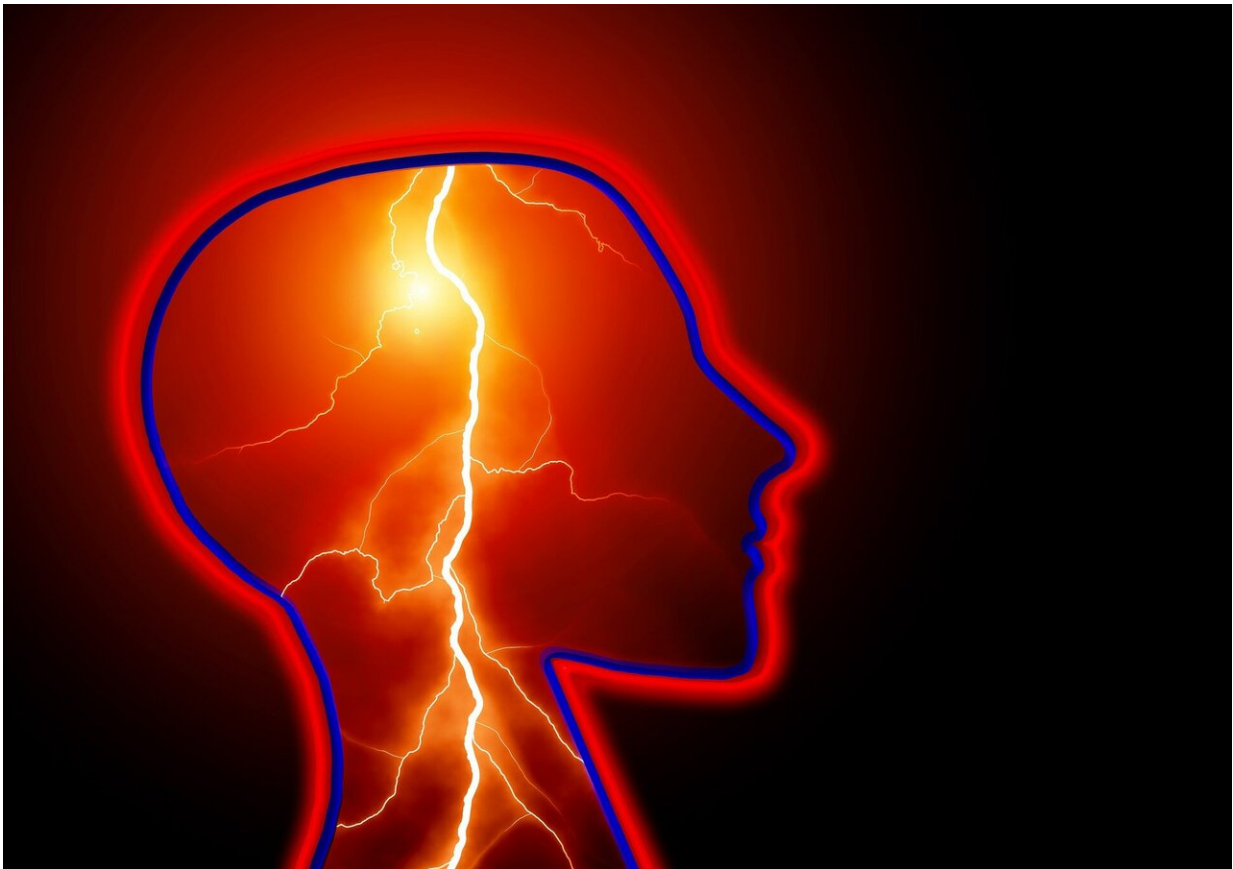


Researchers find sex is not an independent risk factor for stroke mortality

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An analysis of data collected from patients treated for ischemic stroke at Geisinger shows no disparity in outcomes based solely on sex.

Various studies have suggested that women are disproportionately affected by stroke and may have poorer stroke outcomes. Women have a longer life expectancy than men and, therefore, likely have an increased lifetime risk of stroke. Women tend to be older than men at the time of stroke and have a higher pre-stroke degree of disability or dependence in their daily activities, which may contribute to worse outcomes. Rural populations may also have a higher risk of stroke based on a greater incidence of conditions like hypertension and poorly controlled diabetes.

Researchers at Geisinger analyzed electronic health record data for 8,900 patients who had an [ischemic stroke](#) between 2004 and 2019. Overall, female patients had a higher rate of all-cause mortality following stroke. However, after controlling for comorbidities, such as atrial fibrillation, diabetes, heart failure, and chronic lung or kidney diseases, survival rates for men and women were equal.

"Our study results indicate that women may have higher crude mortality after stroke; however, sex is not an [independent risk factor](#) for all-cause mortality in the [rural communities](#) that Geisinger serves," said Vida Abedi, Ph.D., a scientist in the department of molecular and [functional genomics](#) at Geisinger and a co-author of the study. "Ischemic stroke recurrence and the composite outcome of stroke recurrence or death also did not demonstrate evidence of a sex disparity."

The results were published in *Therapeutic Advances in Neurological Disorders*.

More information: Clare Lambert et al, Sex disparity in long-term stroke recurrence and mortality in a rural population in the United States, *Therapeutic Advances in Neurological Disorders* (2020). [DOI: 10.1177/1756286420971895](#)

Provided by Geisinger Health System

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