

Status of Sex and Gender in Emergency Medicine A Five Year Follow Up Report

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Status of Sex and Gender in Emergency Medicine – A Five Year Follow Up Report

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INTRODUCTION

Despite a clear need for the inclusion of sex and gender based medicine in emergency medicine (SGEM) research, a 2011 review showed that EM, unlike the fields of cardiology, psychiatry, and oncology, failed to apply sex/gender considerations to research design. Two percent examined sex/gender as a primary outcome and 29% within the study analysis. This project provides a five-year follow up on SGEM status following the 2014 AEM consensus conference on sex/gender research within EM. The objective was to evaluate the scope of the inclusion of sex and gender in publications by emergency medicine researchers.

METHODS

Using MEDLINE, the term “emergency” was used to identify all English-language, EM-affiliated studies of adult human subjects published between 1/2014 and 2/2017 in which the first, second, or last author belonged to an EM section, division, center, or institution functioning as an emergency department. Five trained abstractors reviewed the data using a standardized data abstraction form. Articles were coded for sex/gender composition, use of sex/gender as a control variable, independent variable, or a component of the primary objective. Inter-rater reliability (IRR) was calculated with 95% confidence intervals (CI).

RESULTS

The search revealed 6,442 articles using the selected “emergency” terms and 2,628 original studies coded as EM-affiliated publications were reviewed; 2,233 met inclusion criteria and were analyzed. The five study areas contributing the most articles were

cardiovascular (20%), administration/crowding (17%), infectious diseases/sepsis (10%), trauma (10%), and emergency medical services (7%). Ninety percent of the published studies were descriptive and 10% experimental. Eighty-six percent (n=1,921) of articles reported the sex/gender composition of the sample and 0.4% (n=8) reported transgender identity. Thirty-four percent reported sex/gender in the study composition, with 27% (n=609) reporting it as a control variable, 24% (n=543) as an independent variable, and 2% using sex/gender as a component of the primary outcome. The adjusted IRR for data abstraction was 97% (95% CI=95.4%, 98.6%).

CONCLUSION

Compared to the 2011 report, the number of EM driven scholarship reporting sex/gender in its study composition has increased from 29% to 33%, while those evaluating it as a primary outcome remains unchanged.