**Abstract: P2787**

**Gender differences in acute type B aortic dissection**

**Authors:**
R Chatani\(^1\), R Murai\(^1\), Y Kawase\(^1\), T Tada\(^1\), K Kadota\(^1\), \(^1\)Kurashiki Central Hospital, cardiology - Kurashiki - Japan,

**Topic(s):**
Acute Aortic Syndromes, Aortic Dissection

**Citation:**
Background: The incidence of aortic dissection has been reported to be lower in women; however, women have a poor prognosis. Also, the incidence of false lumen thrombosis has been reported to be different between Europe, the United States, and Japan. We aimed to determine gender differences in long-term prognosis of acute type B aortic dissection.

Methods: We retrospectively reviewed 220 consecutive patients hospitalized for acute type B aortic dissection between January 2012 to December 2017. After exclusion criteria of unknown onset time, >14 days after the onset, in-hospital death, and aortic events requiring additional treatment during hospitalization were applied, 186 patients were analyzed by gender: 133 men and 53 women. The patient background, treatment method, prognosis, and outcome were compared and examined.

Results: Both the proportions of smoking history and patients receiving oxygen therapy during hospitalization were significantly higher in men (59% vs. 22%, p < 0.01; 91% vs. 72%, p < 0.01, respectively), whereas that of classical aortic dissection was similar between men and women (41% vs. 32%, p = 0.36). The avoidance rate of a composite of all deaths and aortic events 2 years after discharge was similar (hazard ratio, 0.99; 95% confidence interval, 0.52 to 1.59; p = 0.966). (Picture1)

Conclusion: The long-term prognosis of acute type B aortic dissection treated by medical therapy during hospitalization was equivalent in men and women despite gender differences in several background factors.
Abstract:

Gender differences in acute type B aortic dissection

Authors:

R Chatani1, R Murai1, Y Kawase1, T Tada1, K Kadota1,1 Kurashiki Central Hospital, cardiology - Kurashiki - Japan,

Topic(s):
Acute Aortic Syndromes, Aortic Dissection

Citation:
Background: The incidence of aortic dissection has been reported to be lower in women; however, women have a poor prognosis. Also, the incidence of false lumen thrombosis has been reported to be different between Europe, the United States, and Japan. We aimed to determine gender differences in long-term prognosis of acute type B aortic dissection.

Methods: We retrospectively reviewed 220 consecutive patients hospitalized for acute type B aortic dissection between January 2012 to December 2017. After exclusion criteria of unknown onset time, >14 days after the onset, in-hospital death, and aortic events requiring additional treatment during hospitalization were applied, 186 patients were analyzed by gender: 133 men and 53 women. The patient background, treatment method, prognosis, and outcome were compared and examined.

Results: Both the proportions of smoking history and patients receiving oxygen therapy during hospitalization were significantly higher in men (59% vs. 22%, p < 0.01; 91% vs. 72%, p < 0.01, respectively), whereas that of classical aortic dissection was similar between men and women (41% vs. 32%, p = 0.36). The avoidance rate of a composite of all deaths and aortic events 2 years after discharge was similar (hazard ratio, 0.99; 95% confidence interval, 0.52 to 1.59; p = 0.966).

Conclusion: The long-term prognosis of acute type B aortic dissection treated by medical therapy during hospitalization was equivalent in men and women despite gender differences in several background factors.