Structural Sexism in PBM: How to Overcome Disparities in Anemia Management

Sherri Ozawa, MSN, RN

A Global Definition of Patient Blood Management (PBM)



<u>Patient Blood Management</u> is a patient-centered, systematic, evidence-based approach to <u>improve patient outcomes</u> by managing and preserving a <u>patient's own blood</u>, while promoting patient safety and empowerment.

PBM Foundational Principles

- Minimizes Blood Loss.
- Optimizes Hemoglobin Levels Without Transfusion.
- Enhances Patient Safety & Reduces Costs.
- Optimizes Hemostasis & Reduces Bleeding Risk.
- Enhances Rapid & Targeted Decision-Making.
- Improves Patient Safety & Cost Efficiency.
- Reduces the Need for Transfusions.
- Improves Patient Outcomes & Recovery.
- Supports Cost Savings & Resource Optimization
 - Respects Patient Preferences & Improves Engagement.
- Enhances Clinical Outcomes & Safety.
- Supports Ethical & Value-Based Care.

Focused on <u>addressing modifiable risk factors</u> and <u>transfusion avoidance</u>

> Anesth Analg. 2022 Sep 1;135(3):476-488. doi: 10.1213/ANE.00000000005873. Epub 2022 Feb 10.

A Global Definition of Patient Blood Management

Aryeh Shander ^{1, 2}, Jean-Francois Hardy ^{3, 4}, Sherri Ozawa ^{2, 5}, Shannon L Farmer ^{6, 7, 8, 9}, Axel Hofmann ^{6, 8, 9}, Steven M Frank ¹⁰, Daryl J Kor ^{11, 12}, David Faraoni ^{4, 13}, John Freedman ^{14, 15}; Collaborators





27% 13 %

THE URGENT NEED TO IMPLEMENT PATIENT BLOOD MANAGEMENT

POLICY BRIEF

Global prevalence of anemia and bleeding problems

2.9+ BILLION

individuals with anaemia (2-4,195) and/or micronutrient deficiencies (4-7)

- Iron deficiency and other micronutrient deficiencies
- Pre-operative anaemia in surgical patients (IDA, AI)
- Anaemia following surgical interventions
- Anaemia in patients with common noncommunicable diseases
 - Anaemia in patients with oncological and haematological malignancies
 - Anaemia in patients with infectious diseases (including viral and parasitic infections)
 - Hospital-acquired anaemia in patients without haemorrhage or surgery

600+ MILLION

individuals with chronic or acute blood loss and/or bleeding disorders (32-44)

- Major surgery
- Medical and surgical ICU
- Obstetric/peripartum bleeding
 - Heavy menstrual bleeding
- Gastrointestinal bleeding
- Haemoglobinopathies
- Coagulopathies
- Phlebotomy/ venipunctures
- Trauma

Taken together, they represent one of the world's biggest, largely preventable public health and health-economic burdens.

WSJ November 15 2022

Why is PBM of Vital Importance to Women?



Women face existing gender-based inequities in Blood Health

Why do these inequities exist?

What is structural sexism and its relationship to PBM?

How do we change structure to overcome the disadvantage of being a woman thus reduce risk?

Equality vs. Equity vs. Justice

Equality



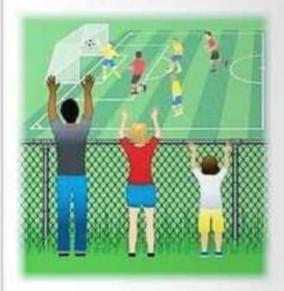
The assumption is that everyone benefits from the same supports. This is equal treatment.

Equity



Everyone gets the supports they need (this is the concept of "affirmative action"), thus producing equity.

Justice



All 3 can see the game
without supports or
accommodations because
the cause(s) of the
inequity was addressed.

The systemic barrier has been removed.

Women's Morbidity Disadvantage

Women live longer than men, but spend more time living in poorer health

- EU: 19 Years of poor health for women vs. 15 for men
- In 7 member states women spend 25 + in poor health

Women face far greater individual and societal challenges that impede good health

- Rising gender-based violence
- Lack of access to healthcare services
- Widening post COVID 19 gender pay gap

European Institute for Gender Equality. (2019). Women live longer but with poorer health. Available from: https://eige.europa.eu/publications-resources/toolkits-guides/gender-equality-index-2019-report/women-live-longer-poorer-health?language_content_entity=en. [Accessed 28 February 2024]

World Health Organization. Women's health. Available from: https://www.who.int/health-topics/women-s-health. [Accessed 28 Feb 2024]

Gender Discrimination and Health Harms - Realities

Direct discrimination or harassment

- Gender bias in medical institutions (self-reported experiences)
- Not necessarily structural

Bias amongst physicians and medical institutions

- Anti women gender bias in medical education textbooks
- Lower reimbursement rates (30% lower for female specific surgical procedures)
- Women less likely than men to receive the most effective diagnostics and treatments

Disease and Women

Women spend 1/3 life in menopause – by 2030 1.2 billion women – $\frac{1}{4}$ see treatment for symptoms

8% of world has autoimmune disease, 78% women

2x as likely to suffer chronic pain

Women less likely to receive Indicated therapy for MI

In some conditions (inherited bleeding disorders) women diagnosed 7-10 years later than men

Pain in women is perceived as hysterical, emotional, fabricated – resulting in delayed care

Gaslighting (psychological manipulation)

Medical Gaslighting



- "Of course you're tired you are a mom"
- "You are overthinking this"
- Slower response to care <u>even</u> <u>in emergency settings</u> -Abd pain
 - 33 minutes slower
 - 13% less likely to receive opiates

Chen, E. H., Shofer, F. S., Dean, A. J., Hollander, J. E., Baxt, W. G., Robey, J. L., Sease, K. L., & Mills, A. M. (2008). Gender disparity in analgesic treatment of emergency department patients with acute abdominal pain. *Academic Emergency Medicine : Official Journal of the Society for Academic Emergency Medicine*, 15(5), 414–418. https://doi.org/10.1111/j.1553-2712.2008.00100.x

• "it's only in her head": Gaslighting in women's health | healthnews. (n.d.). Retrieved December 3, 2022, from https://healthnews.com/news/its-only-in-her-head-gaslighting-women-at-doctors-office/

Hysteria- The Wastebasket Diagnosis

From 1900 BCE to the 1950's

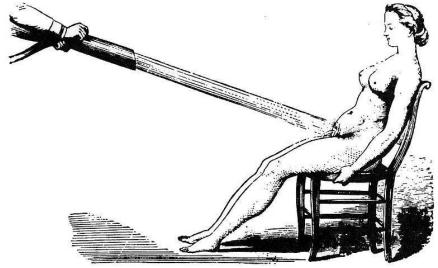


"The uterus was believed to wander around the body

like an animal, hungry for semen."







King, S. (2016) "A womb of one's own... Part two." *Menstrual Matters*, accessed 3/2/24, https://www.menstrual-matters.com/womb-part-2/

Origins of concept of Structural Sexism

VO

EDITORIAL

The Yentl Syndrome

Author: Bernadine Healy, M.D. Author Info & Affiliations

Published July 25, 1991 | N Engl J Med 1991;325:274-276 | DOI: 10.1

JOURNAL ARTICLE

The Yentl syndrome is alive and well 🚥

C. Noel Bairey Merz **Author Notes**

https://doi.org/10.1093/eur

Published: 10 March 2011

JACC Journals > JACC: Asia > Archives > Vol. 4 No. 4

Previous | Next

Unequal Treatment and Yentl Syndrome: Are We Providing Appropriate Care for Our TAVR Patients?* Popen Access

Editorial Comment

Pranav M. Patel and Antonio H. Frangieh

JACC: Asia. 2024 Apr, 4 (4) 303-305

Original Research: Sex-Specific Disparities in Clinical Outcomes After Transcatheter Aortic Valve Replacement Among Different Racial Populations

European Heart Journal, Vo

Women with cardiac symptoms are less likely be triaged as emergent, to undergo electrocardiography, or be admitted to the hospital or observation unit

When did the National Institutes of Health (Est. 1887) Mandate that Women be included in clinical trials?

- 1900
- 1950
- 1979
- 1993
- 2007

NIH ensures that women and minorities are included in all clinical research

In trials including women and minorities, the trial should be designed and carried out so that it is possible to analyze whether the variables being studied affect women and minorities differently than others

Cost is not an acceptable reason for excluding women and minorities

Structural Sexism Defined

Societal systems, policies, and practices that systematically disadvantage individuals based on their gender, predominantly favoring men over women

Perpetuates unequal power dynamics and reinforces gender stereotypes

Ingrained in the fabric of society, often operating subtly but exerting profound influence, leading to disparities in opportunities, resources, and outcomes between genders.

Key Factor Medically: Underrepresentation of women in medical leadership and research

Antonym: Social Justice





Structural Sexism and PBM Implications: Disproportionalit y

Patient Blood Management:

Patient blood management is a patient-centered, systematic, evidence-based approach to improve patient outcomes by managing and preserving a patient's own blood, while promoting patient safety and empowerment.

EVEN MORE IMPORTANT FOR WOMEN'S HEALTH -

Hgb thresholds and ferritin reference ranges

Dismissal/under-recognition of iron deficiency

Stigmatization of menstrual bleeding and complacency

The presence of un/under/delayed diagnosis of inherited bleeding disorders

Differences in sex-based transfusion practice



Sex specific definitions of anaemia contribute to health inequity and sociomedical injustice



Hemoglobin thresholds according to biological sex are equivalent for men and women until menarche

Women <12 g/dL

Men <13 g/dL



These thresholds were first adopted by WHO in 1968 based on four published references and one set of unpublished observations, only two of which addressed sex differences



No inquiry about dietary habits, iron supplementation, or symptoms of anemia

REVIEW ARTICLES

Perioperative Anemia: Prevention, Diagnosis, and Management Throughout the Spectrum of Perioperative Care

Warner, Matthew A. MD*,†; Shore-Lesserson, Linda MD†,‡; Shander, Aryeh MD†,§; Patel, Sephalie Y. MD†,‡; Perelman, Seth I. MD†,¶; Guinn, Nicole R. MD†,#

Author Information ⊗

Anesthesia & Analgesia 130(5):p 1364-1380, May 2020. | DOI: 10.1213/ANE.00000000004727

Ann Surg. 2023 Apr; 277(4): 581–590.

Published online 2022 Sep 21. doi: 10.1097/SLA.000000000005721

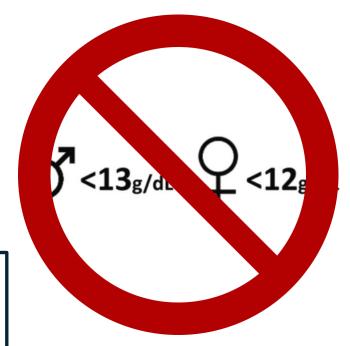
PMCID: PMC9994846

NIHMSID: NIHMS1836628

PMID: <u>36134567</u>

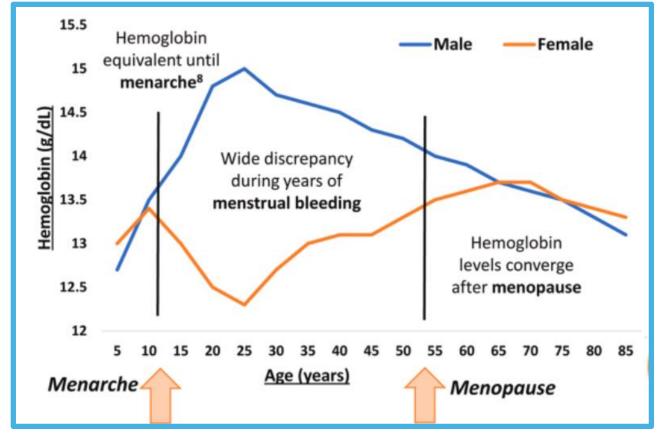
Recommendations From the International Consensus Conference on Anemia Management in Surgical Patients (ICCAMS)

Aryeh Shander, MD, MD, Howard L. Corwin, MD, Jens Meier, MD, Michael Auerbach, MD, Elvira Bisbe, MD, Seanna Blitz, MD, Jochen Erhard, MD, David Faraoni, MD, Seanna Blitz, MD, Seanna Blitz, MD, Tochen Erhard, MD, David Faraoni, MD, Seanna Blitz, MD, Seanna Blitz, MD, Tochen Erhard, MD, Howard Faraoni, MD, Seanna Blitz, MD, Tochen Erhard, MD, Howard Faraoni, MD, Seanna Blitz, MD, Seanna Bl



Recommendation:
Single Hgb threshold
to define pre
surgical anemia
13g/dL

Sex Based Hgb Thresholds



How do sex hormones impact hemoglobin?

- Estrogens regulate erythropoiesis
- Androgens stimulate erythropoietin
- Testosterone impacts hemoglobin mean and upper limits of normal
- No proof that higher levels of tissue oxygenation for a given red cell mass in women explain a lower baseline HGB

Takeaway: Lower limit of "normal" in HGB in men and women cannot be explained by sex hormones

So if not hormonal influence then what is the explanation?

Chronic blood loss from menses and iron deficiency is the only other major difference between the sexes

- Women are iron deficient during menstrual years because
 - Chronic blood loss
 - Lack of clinician and patient assessment of normal menstruation
 - High prevalence of ID =Lower baseline hgb=low hemoglobin reference intervals





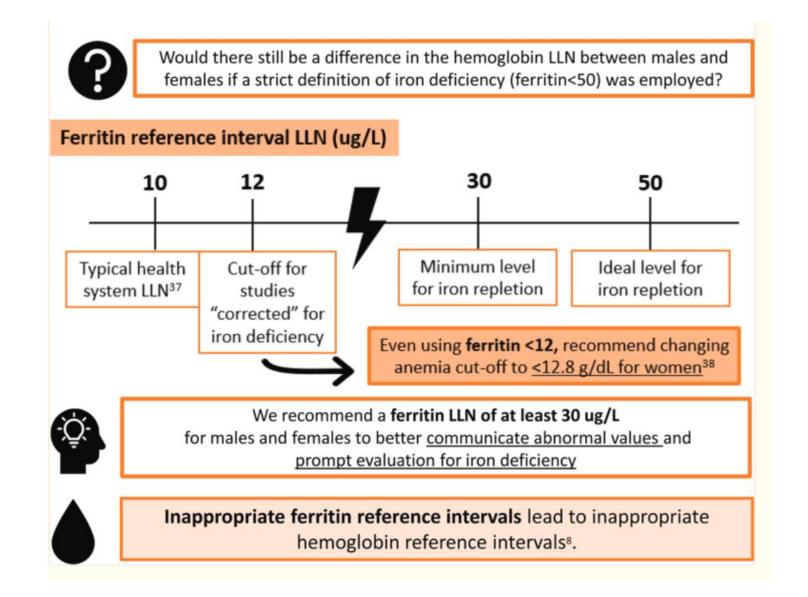
Barton, J. C., Wiener, H. H., Acton, R. T., Adams, P. C., Eckfeldt, J. H., Gordeuk, V. R., Harris, E. L., McLaren, C. E., Harrison, H., McLaren, G. D., & Reboussin, D. M. (2020). Prevalence of iron deficiency in 62,685 women of seven race/ethnicity groups: The HEIRS Study. *PLOS ONE*, 15(4), e0232125. https://doi.org/10.1371/journal.pone.0232125

DePalma, R. G., Hayes, V. W., & O'Leary, T. J. (2021). Optimal serum ferritin level range: iron status measure and inflammatory biomarker. *Metallomics*, 13(6). https://doi.org/10.1093/mtomcs/mfab030

Weyand, A. C., & James, P. D. (2020). Sexism in the management of bleeding disorders. Research and Practice in Thrombosis and Haemostasis, 5(1), 51–54. https://doi.org/10.1002/rth2.12468

Fe Deficiency and Ferritin Reference Intervals

- Globally 30% women
 Hgb under 12g/dL
- 50% from ID
- In the US 10% had hgb<12 g/dL BUT
- 30% of US women have ID (ferritin < 25)



Ferritin Reference Ranges





Blood (2022) 140 (Supplement 1): 11078–11079

64th ASH Annual Meeting Abstracts

ONLINE PUBLICATION ONLY

102.IRON HOMEOSTASIS AND BIOLOGY

The Origin of Ferritin Reference Intervals: A Systematic Review

Judy Truong, MD¹, Kanza Naveed^{2,*}, Daniel Beriault, MSc, PhD FCACB^{3,*}, David Lightfoot^{4,*},

Michael Fralick, MD PhD SM^{5,*}, Michelle Sholzberg, MDM, MSc⁶⁻¹⁰

- 40 studies analyzing the lower limit normal of ferritin
 - Total 30,474 females and 29,615 males
 - Lower limit normal was 8μg for Females, 27 μg for males
 - Female lower limit normal is regrettably lower than males
 - Female lower limit "normal" falls in line with clinical iron deficiency.
 - Not evidence based, maximizes health inequity and medicosocial injustice



Consequences of Anemia in Women



Impact of Lower Hemoglobin Thresholds in Women

Study	Population	Age	Results	Design
Health ABC	Community dwelling adults	70-79 YO	5X higher mortality in women w/ hgb <11g/dL	Longitudinal population based
PRAISE	CHF Patients N=1130	>65 YO	52% higher risk of death in women w/ hgb <12	Multicenter randomized clinical trial of amlodipine vs. placebo
Cardiovascular Health Study	Community dwelling adults	>65 YO	Lower survival rates for women with hgb <12.6	Longitudinal population-based study of CAD and stroke
Women's Health and Aging study	Community dwelling disabled women N=1002	>65 YO	Increased morbidity w/lower hgb, as hgb increase mortality decreased up to 13.9	Prospective and population based

Zakai, N. A., Katz, R., Hirsch, C. H., Shlipak, M. G., Paulo H.M. Chaves, Newman, A. B., & Cushman, M. (2005). A Prospective Study of Anemia Status, Hemoglobin Concentration, and Mortality in an Elderly Cohort. *Archives of Internal Medicine*, 165(19), 2214–2214. https://doi.org/10.1001/archinte.165.19.2214

Dariush Mozaffarian, Nye, R. G., & Levy, W. C. (2003). Anemia predicts mortality in severe heart failure. 41(11), 1933–1939. https://doi.org/10.1016/s0735-1097(03)00425-x

Patel, K. V., Harris, T. B., Faulhaber, M., Angleman, S. B., Connelly, S., Bauer, D. C., Kuller, L. H., Newman, A. B., Guralnik, J. M., & for the Health, A. (2007). Racial variation in the relationship of anemia with mortality and mobility disability among older adults. *Blood*, 109(11), 4663–4670. https://doi.org/10.1182/blood-2006-10-055384

Consequences of Maternal Anemia

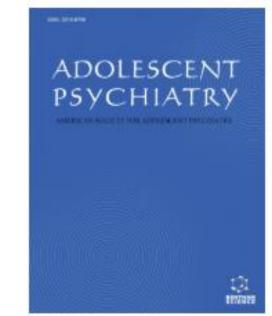
- For mom IDA is associated:
 - Increased risk of placental abruption
 - Post partum depression
 - Death
 - Post partum hemorrhage
 - Composite severe maternal morbidity and mortality
- For baby
 - Developmental delays
 - Impaired cognition
 - Long term behavioral and motor function issues
 - Attention and learning problems
 - Decreased social engagement into adulthood





Disproportionate Impact

Impact of Anaemia on Cognitive Impairment and Depression Levels Among Young Adults: A Cross-sectional Study Highlighting Gender Disparities



Authors: Vinitha Chandrasekaran¹, Neena Elsa Varghese¹, Krishnaveni K² and Kallieswalali K

View Affiliations

Source: Adolescent Psychiatry, Volume 15, Issue 2, Jul 2025, p. 174 - 187

DOI: https://doi.org/10.2174/0122106766313207241015111247

- 546 Adults evaluated, age 17-25
- Prevalence of anemia =73.2% 29.4% male, 43.7% female
- Subjects reported:
 - Forgetfulness
 - Distractibility
 - False triggering
 - Depression



Intergenerational Cycle of Iron Deficiency

Adolescent with Iron Deficiency







Pregnant with Iron
Deficiency



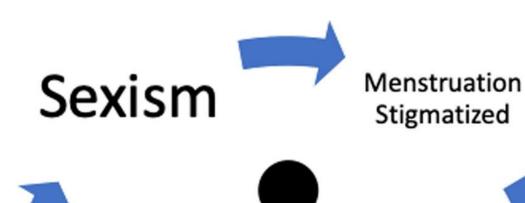




Increased risk of maternal and neonatal morbidity and mortality

Infant with Iron Deficiency

Neurocognitive effects, educational challenges







Patients and providers unaware of what constitutes a "normal period"

Sexism is a long-standing issue in bleeding disorders, leading to inequity for affected women

Clinical and research focus within bleeding disorders has been on men and hemophilia

Stigmatization of menstruation leads to decreased awareness and inadequate care

Women with BDs are underrecognized, underdiagnosed, and undertreated



Heavy menstrual bleeding (stigmatized)



Iron Deficiency





Missed diagnosis of a bleeding disorder



cycle of Inequity reinforced by systemic sexism and normalizing what is abnormal

Normalization of low ferritin





Missing opportunity to determine cause of low HGB



Normalization of low HGB

Merz, L. E., Siad, F. M., Creary, M., Sholzberg, M., & Weyand, A. C. (2023). Laboratory-based inequity in thrombosis and hemostasis: review of the evidence. *Research and Practice in Thrombosis and Haemostasis*, 7(2), 100117. https://doi.org/10.1016/j.rpth.2023.100117

What can we do?

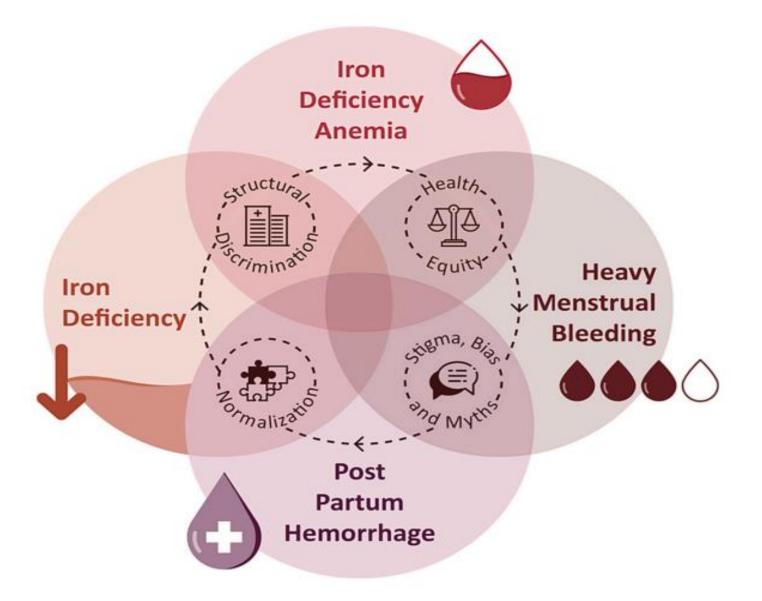
Address structural sexism in care:

- Re-evaluate and change references ranges to make women and men the same (Hgb, Ferritin, etc.)
- Take anemia and iron deficiency seriously and treat it
- Informed conversations about menstrual bleeding
- Treat menstrual bleeding (especially menorrhagia) as a significant health issue
- Proactively detect hereditary bleeding disorders

Multidisciplinary care

Encourage and foster patient empowerment

Call out structural sexism and adjust practice to address it





Blood Reviews
Volume 64, March 2024, 101159

Iron deficiency anemia among women: An issue of health equity

Thank you

