

A Lesson from COVID 19 in
the Importance of Sex
Disaggregated Data:

*Sex/Gender differences in
SARS-CoV-2 infection and
mortality rates*

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**SEX AND GENDER HEALTH
EDUCATION SUMMIT**

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Disclosures

None



Background

- Sex and gender have important influences on disease prevalence, pathophysiology, clinical presentation, treatment and prognosis.
- It is essential to collect sex-disaggregated data to understand susceptibility to disease and health outcomes.
- Preliminary data from the 2020 COVID-19 pandemic caused by the coronavirus SARS CoV-2 suggest that women with COVID-19 have **significantly** lower mortality rates compared to men globally.
- The objective of this study is to evaluate sex differences in SARS-CoV-2 infection rates and mortality at a country level



Methods

- Data source: Global Health 5050 website
 - Housed University College London
 - Collects government reported national surveillance data for COVID-19
 - <https://globalhealth5050.org/covid19>
 - These data lag behind figures for infections & deaths because only sex disaggregated data are collected
- Analysis of country data to determine the proportion of men and women with COVID-19 infection and associated deaths.
- Inclusion: Data from countries with completely sex disaggregated data
- Exclusion: Data from countries with incomplete sex disaggregation of data and from countries with no sex disaggregation of data



Global Health 5050 data tracker
<https://globalhealth5050.org/covid19>
accessed May 8, 2020

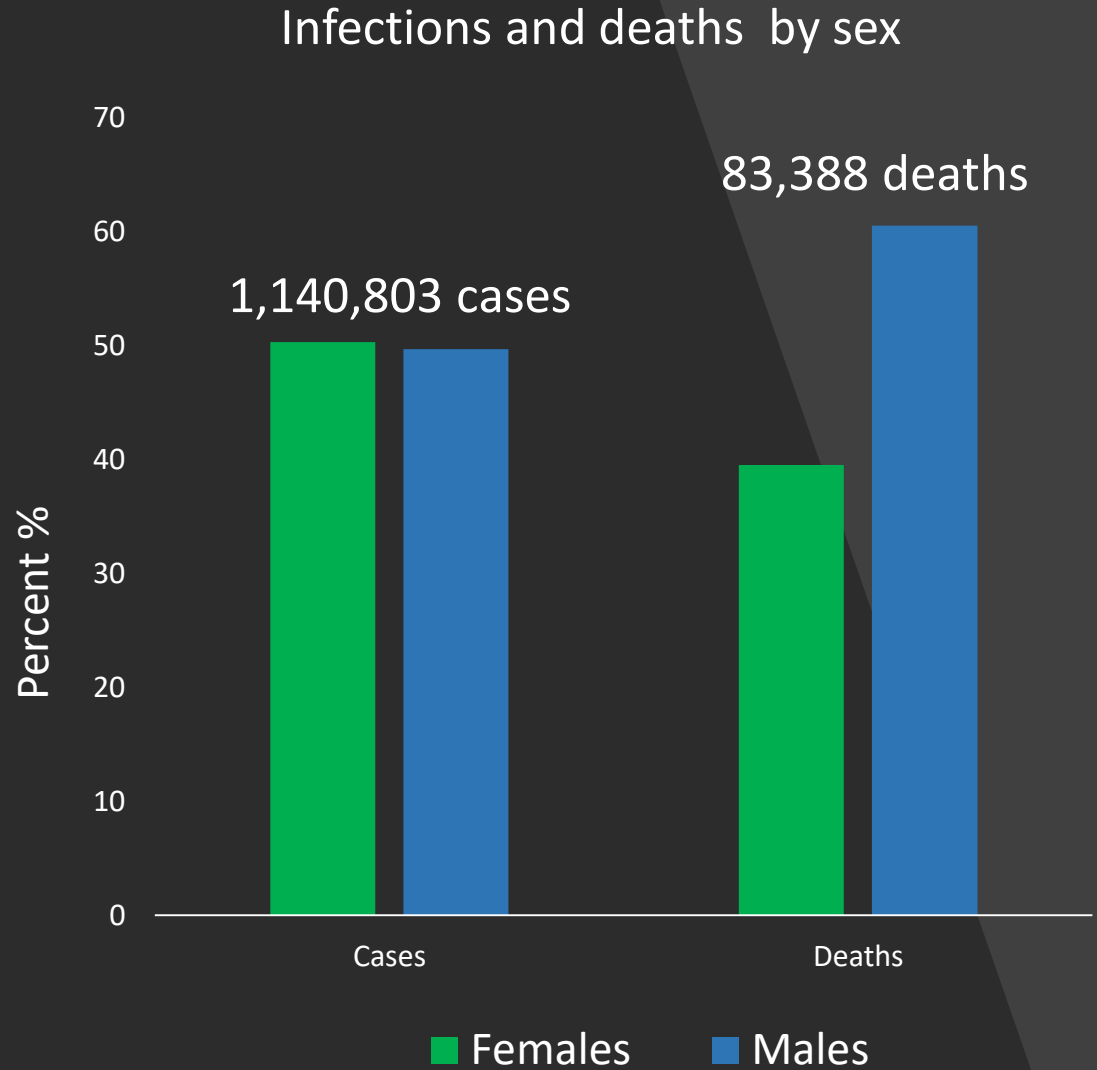


Snapshot of Global Health 5050 database May 8, 2020

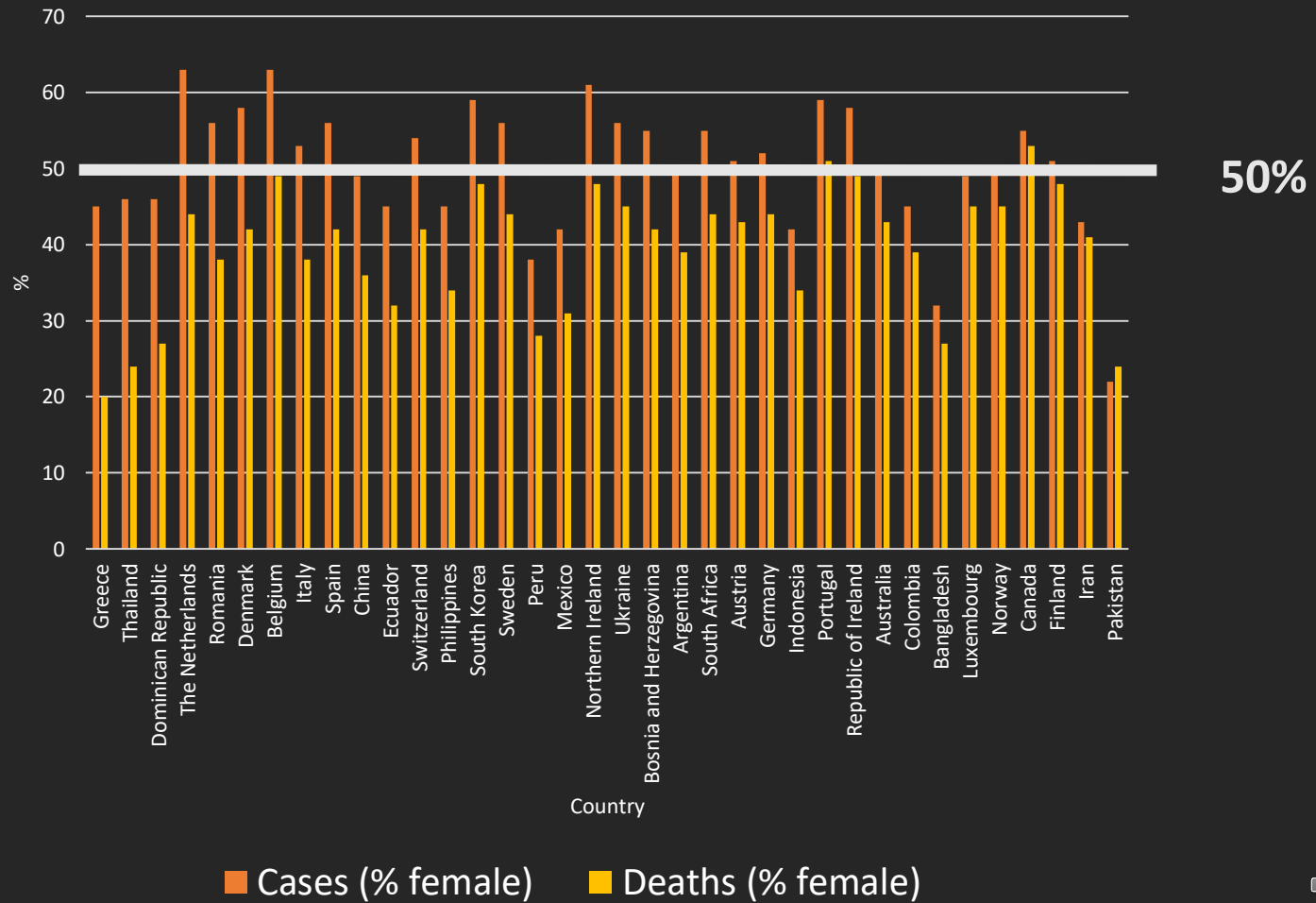
- 3,044,513 cases of COVID-19 and 181,742 deaths in 78 countries
- Sex disaggregated data
 - Complete disaggregation in 36 countries
 - Partial disaggregation in 26 countries
 - No disaggregation in 16 countries



Cases and deaths in 36 countries



COVID-19: Cases and mortality in women, 36 countries



Global Health 5050 data tracker https://globalhealth5050.org/covid19_ accessed May 8 , 2020

COVID 19: Sex disaggregated cases and deaths May and August 2020

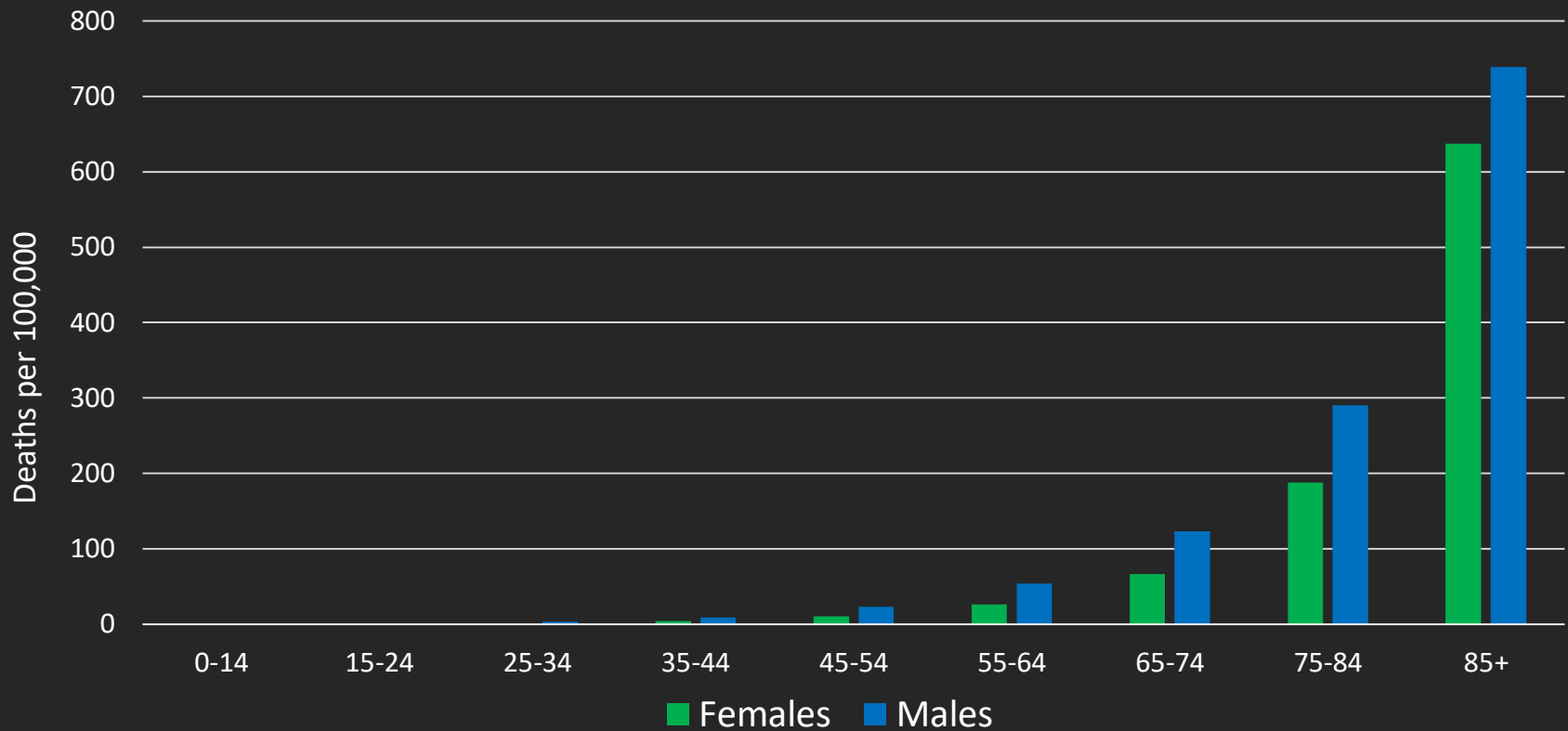
	Date	No countries	Total	% Women (range)	% Men (range)	Male to Female ratio
Cases	5/8/2020	36	1,140,803	50.3 % (22-63)	49.7%	-----
Deaths	5/8/2020	36	83,388	-----	-----	1.62 (0.9-3.2)
Cases	8/7/2020	72	8,163,457	46.6% (15-53)	53.4% (39-85)	-----
Deaths	8/7/2020	72	394,288	-----	-----	1.43 (0.5-2.5)

Global Health 5050 data tracker <https://globalhealth5050.org/covid19> accessed August 12, 2020



USA deaths (per 100,000) by age and sex

Data July 29, 2020



Global Health 5050 data tracker https://globalhealth5050.org/covid19_ accessed August 12, 2020



Discussion

- Sex difference in mortality, with higher deaths in men
- Possible explanations
 - Sex (biologically based) differences in the immune system
 - Gender differences in environmental exposures, access to health care, desire to seek health care
 - Sex/gender differences in co-morbid conditions

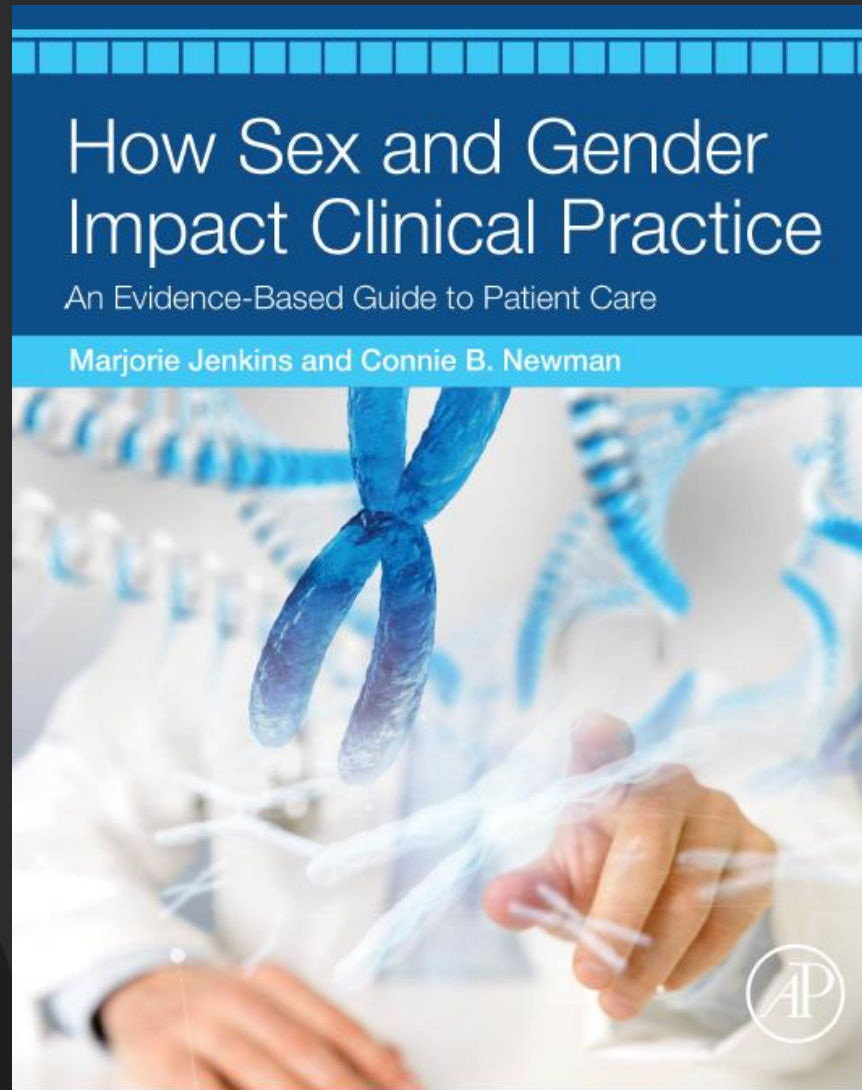


Conclusions

- Higher mortality rates in men with COVID-19, despite equivalent infection rates by sex are suggested by preliminary country data
- The mechanisms of this difference in mortality may be related to sex (biological differences), comorbidities or gender related factors
- These data highlight the importance of disaggregating data by sex and gender
 - To understand disease susceptibility, prevalence and outcomes
 - To develop safe and effective treatments and preventive measures (vaccines) in men and women



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Thank you.

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