

Women in EP survey

Abstract

Background: The Women in Electrophysiology (WEP) committee of the European Heart Rhythm Association (EHRA) was created in 2014. The objectives of this new committee were to initiate and support research in female patients and to strengthen gender-equality within the EHRA. In order to better understand the needs of the female EP community, female members of the European Society of Cardiology (ESC) were contacted to participate in an online survey.

Methods: In October 2014, female members of the ESC with interest in cardiac arrhythmias were sent an email with an online link to the survey. A reminder email was sent in December 2014 and the survey was closed after 2 months.

Results: The response rate was 2.5%. 388 female ESC members (42 ± 10 years of age, 6.9 ± 7.3 years spent in the field of EP) filled out the survey. 144 responders (49%) were member of the EHRA and 210 (71%) were members of the National Society of their country. 124 (42%) responders ranked clinical EP, 98 (33%) ranked invasive EP and 73 (25%) ranked devices as the #1 field of interest. 46 (16%) performed >100 ablations/year, 14 (5%) performed > 100 complex ablations/year and 64 (22%) performed > 100 device implantations per year. 234 (88%) of the responders thought that there should be more research performed in female patients. 196 (74%) responders felt that female patients specific sessions at the upcoming congresses were necessary. However, some individual comments argued against. 225 (87%) responders showed interest in female EP physician specific activities. 174 (77%) responders answered that they would be interested in both scientific and networking events. 210 (83%) responders were interested in radiation exposure for EP physicians. 243 (94%) responders thought that an EHRA consensus statement on radiation exposure during pregnancy of EP physicians would be useful. 191 (75%) responders answered that they found female mentorship important.

Conclusions: Many female EP physicians responded. They were more likely to be national society than EHRA members. A large majority supports the stimulation on research of female patients. There is interest in female EP physician activities; both scientific and networking. Women in EP sessions at congresses are supported by the majority. In addition, a majority feels that radiation is an important topic and a large majority would welcome an EHRA consensus statement on radiation exposure during pregnancy. Female mentorship was generally considered useful.

Introduction

In 2014 the Women in EP (WEP) committee of the European Heart Rhythm Association (EHRA) was created. The objectives of this new committee were to heighten the awareness of female specific aspects of cardiac arrhythmias and to initiate and support research in female patients. Additionally, the aim was to develop tools for guidance and sharing experience for female physicians and to strengthen gender-equality in EHRA and ESC events. In order to better understand and serve the needs of the female EP community and arrhythmia patients an online survey was conducted.

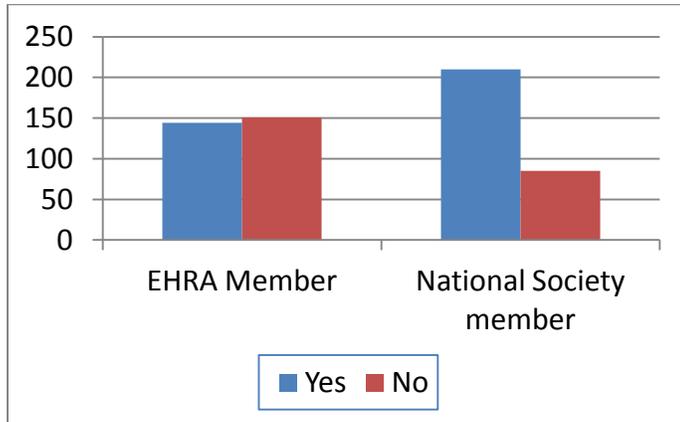
Methods

In October 2014 female members of the ESC with interest in cardiac arrhythmias were contacted via email to participate in an online survey. 15 328 ESC members who marked their fields of interest as arrhythmias and/or atrial fibrillation and/or heart failure and/or sudden cardiac death and resuscitation and/or syncope were sent an email with an online link to the survey. A reminder email was sent in December and the survey was closed after 2 months.

Results

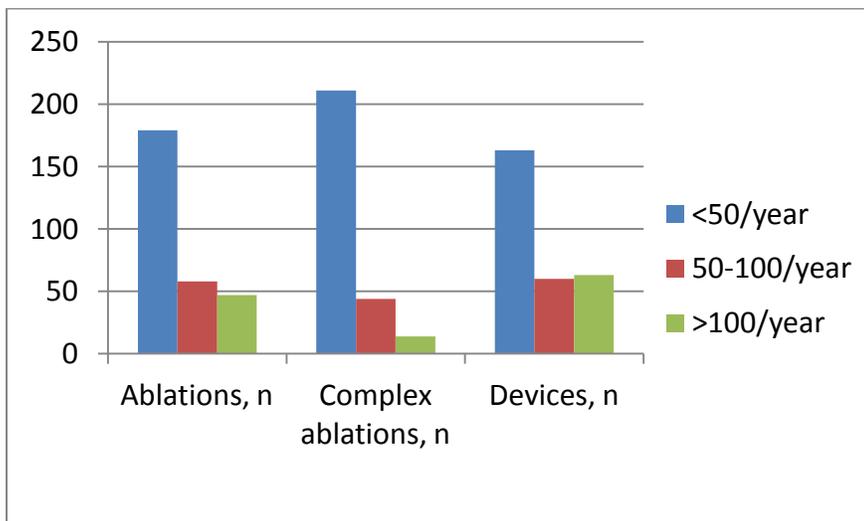
388 (2.5%) females responded. The mean age of the responders was 42 ± 10 years (median: 40 years, 25 percentile: 34 and 75 percentile: 49 years). The responders spent a mean of 6.9 ± 7.3 years in the field of electrophysiology (median: 5 years, 25 percentile: 1 and 75 percentile: 10 years). 241 (62%) responders were living with a partner and 198 (52%) had children (83 (22%) had one, 84 (22%) had two and 31 (8%) had three or more children). 144 responders (49%) were member of the EHRA and 210 (71%) were active members of the National Society of their country (Figure 1).

Figure 1. EHRA and National Society membership distribution of the responders



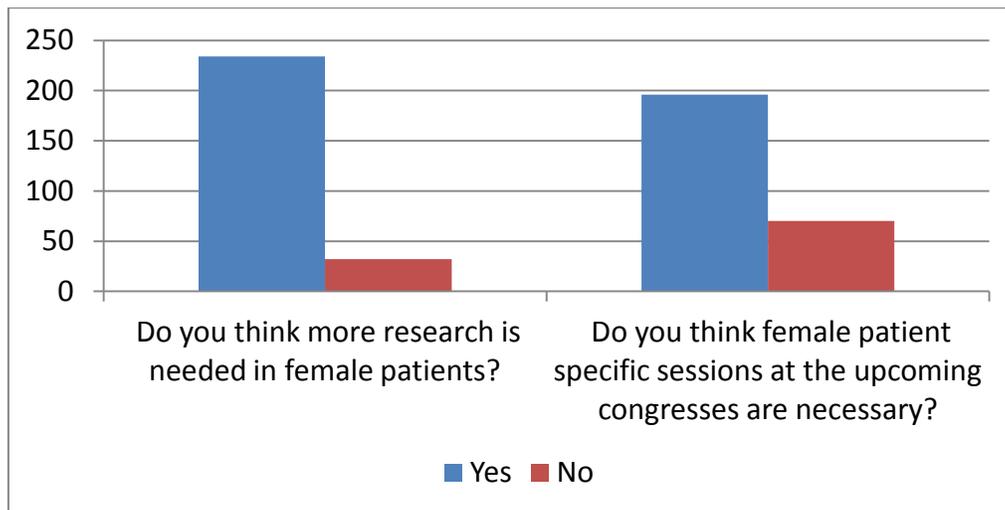
124 (42%) responders ranked clinical EP, 98 (33%) ranked invasive EP and 73 (25%) ranked devices as the #1 field of interest. 46 (16%) performed >100 ablations/year, 14 (5%) performed >100 complex ablations/year and 64 (22%) performed >100 device implantations per year. 179 (63%) performed <50 ablations/year, 211 (78%) <50 complex ablations/year and 163 (57%) <50 device implantations/year (Figure 2).

Figure 2. Distribution of the yearly numbers of ablations, complex ablations and device implantations among the responders



234 (88%) responders thought that there should be more research performed in female patients. Individual comments were that “women are very much underrepresented in most large scale trials. Their unique physiology affects arrhythmias...”; “very few women are included in studies hence the data does not truly reflect what happens in women”; “in most of the surveys and especially guidelines the men are a big majority, and women are seen as a special "subgroup" which cannot be”. Six other similar individual comments were made. 196 (74%) responders thought that female patients’ specific sessions at the upcoming congresses were necessary (Figure 3). However, some individual comments argued against: “I suspect that it will narrow down the audience...”; “if anything I think this could be counterproductive as I can see many people not attending such sessions”; “I am offended by the idea of female specific sessions. We should aim to treat patients of all sexes, races, religions, sexual orientations etc. equally”; “I think it is stupid that we have to have female specific sessions, in all the sessions males and females should be considered, but to boost this in the beginning I think gender specific sessions could be good.”; “should always be included and appreciated in general sessions when relevant” and 5 similar comments.

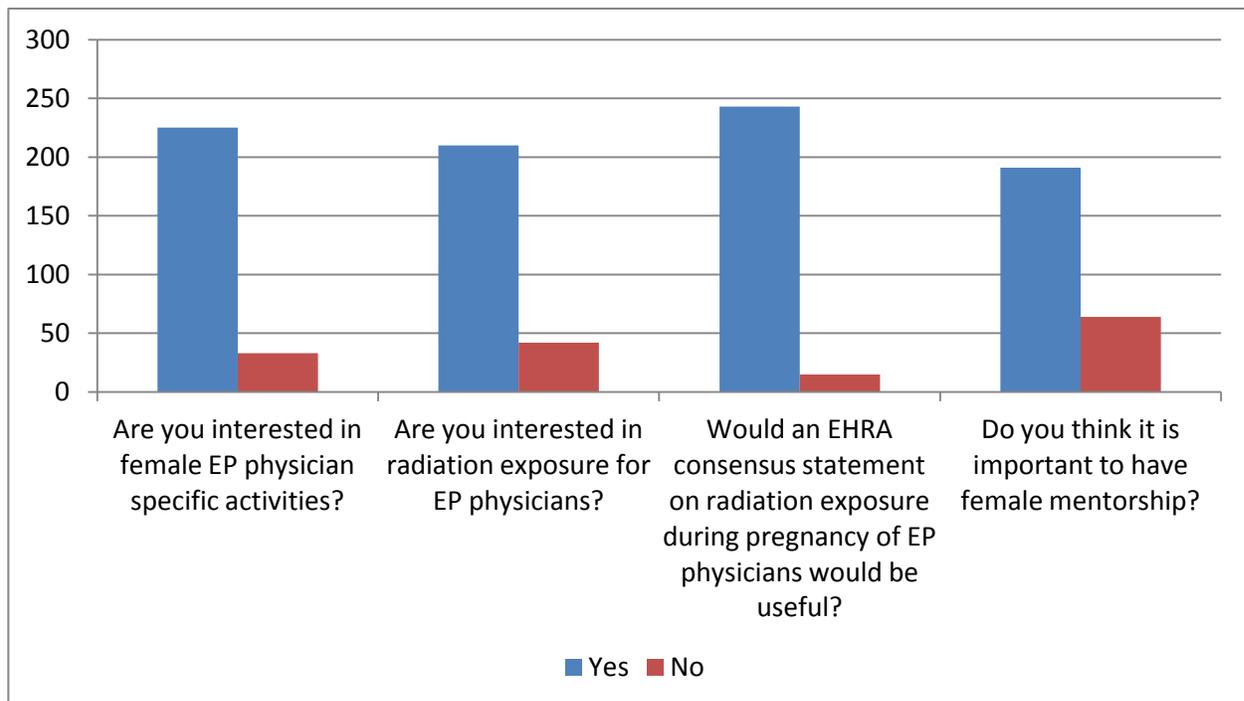
Figure 3. Distribution of answers on questions related to research and scientific sessions at congresses on female patients



225 (87%) responders showed interest in female EP physician specific activities. 174 (77%) responders answered that they would be interested in both scientific and networking events. 210 (83%) responders showed interest in radiation exposure for EP physicians. 243

(94%) responders thought that an EHRA consensus statement on radiation exposure during pregnancy of EP physicians would be useful. 191 (75%) responders answered that they found female mentorship important (Figure 4).

Figure 4. Distribution of answers on interest in female EP specific sessions, radiation exposure and female mentorship among the responders



Conclusions

Many female EP physicians responded, a majority between 35-49 years of age. They were more likely to be National Society than EHRA members. A large majority supports the stimulation on research of female patients. There is interest in female EP physician activities; both scientific and networking. Women in EP sessions at congresses are supported by the majority, but there was also some negative feedback - inclusion in general sessions was suggested by some as an alternative. The majority feels that radiation is an important topic and a large majority would welcome an EHRA consensus statement on radiation exposure during pregnancy. Female mentorship was generally considered useful.