

Men hit harder by COVID-19 deaths, researcher finds

Brad Crouch, Health Reporter, The Advertiser

Men are dying from COVID-19 at about twice the rate of women, partly because the health system is not catering for their general care leaving them in poorer health when they get infected, a leading Adelaide men's health researcher says.

Professor Gary Wittert's analysis of the gender breakdown of cases around the world shows men are being hit much harder than women who contract the infection.

"Compared to women, men with COVID-19 are more likely to have severe disease (56 per cent vs 44 per cent), require admission to intensive care (71 per cent vs 29 per cent) and die (69 per cent vs 31 per cent)," reads a paper by Prof Wittert, published on Thursday in the journal *Obesity Research and Clinical Practice*.

The global gender disparity shows a similar trend in Australia, where the only deaths in the 30-49 age groups have been men, while in the 50-79 year groups more than twice as many men as women have died.

COVID-19 StatisticsAustralia

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In the 80-plus range the death rates are slightly higher for women, which Prof Wittert said may be due to "long lived men" being relatively more healthy.

Prof Wittert, from the Freemasons Foundation Centre for Men's Health at the University of Adelaide, as well as the South Australian Health and Medical Research Institute (SAHMRI), said poorer male outcomes reflected the poorer state of male health to begin with. But, contrary to some popular belief, this was not due to smoking, drinking and avoiding doctors.



 Professor Gary Wittert: “Instead of blaming men we need to focus on providing care that’s personalised to the gender of the consumer.”

“The reasons for the poorer state of health in men cannot be attributed to lack of interest in their health, or not going to the doctor,” Prof Wittert said.

“Men are interested in their health, and they do go to the doctor but both men and women have specific health care needs and instead of blaming men we need to focus on providing care that’s personalised to the gender of the consumer.

“That requires some resources for optimising models care and for training health care practitioners.”

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Prof Wittert authored the paper in collaboration with Professor Robert McLachlan from the Hudson Institute of Medical Research and Monash University, Victoria.

Their paper notes that: “For decades, a persistently higher reported prevalence of, and poorer outcomes from, chronic disease between men and women has been reported.”

It dismissed higher rates of smoking among man as an “implausible explanation”, rejected testosterone as a cause and said stereotypes about gender were best avoided.