COVID-19: DEATHS IN HEALTHCARE WORKERS

Let’s not forget our female front line

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Analysis of covid-19 related deaths among UK healthcare workers implies that it is not only ethnic minority groups that we must worry about— it is also our majority female NHS front line. Age and sex adjusted data indicate that young female NHS workers might have a mortality rate almost twice that of a matched non-NHS employed group.

Over-representation of women in the NHS, making up 77% of total workforce and 89% of nursing staff, suggests that women are at greater risk of direct sustained viral exposure. Inadequate and ill fitting personal protective equipment for women might be a contributing factor, designed and procured in a “one size fits all” manner. Lack of social distancing among healthcare staff in non-clinical areas such as staff rooms might also increase potential for viral transmission.

We acknowledge the substantial male death rate in the general population, but the majority female healthcare sector is a unique and potentially vulnerable group, which should prompt the NHS to provide gender focused measures of protection.

A higher propensity for covid related illness or deaths among female healthcare workers might have wider population implications—for example, the depletion of available skilled healthcare staff, as seen during the Ebola pandemic. A gendered approach to covid-19 might improve workforce planning and minimise overall economic impact.

Relative paucity of sex disaggregated data as the pandemic has developed is a cause for concern. Fortunately, the gendered impact of covid-19 is being highlighted by groups such as the gender and covid-19 working group and Global Health 50/50. To better understand the interplay between disease and demographics, we urgently need open and transparent data from the NHS. Until then the true toll of covid-19 on our healthcare workers remains unclear.

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Full response at: https://www.bmj.com/content/369/bmj.m1621/rr-4.

1 Rimmer A. Covid-19: Two thirds of healthcare workers who have died were from ethnic minorities. BMJ 2020;369:m1621. 10.1136/bmj.m1621 32327412

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