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Uncovering gender bias in health services: the case of kidney transplantation

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dialysis in 2017-2019, 35% were women. 40% of women and 34% of men lived in most deprived areas. Men were more comorbid than women at dialysis start. At the national level, women had less access to the KTWL compared to men one and three years after dialysis start. Analyses were stratified by age (<60 and ≥ 60 years old). Only women aged more than 60 had less access to the KTWL one year (adjHR: 0.76 [0.71 - 0.82]) and three years (adjHR: 0.75 [0.71 - 0.81]) after dialysis start. At regional level, the same trends were found in Nouvelle Aquitaine and Pays de Loire one year after dialysis start and two more regions (Bourgogne-Franche-Comté and Île-de-France) 3 years after dialysis start. Gender-based disparities in KTWL persist even after controlling for EDI and comorbidities, especially among women over 60. These results are issued from a health service research project on gender-based disparities of access to KTWL in France. A qualitative study is ongoing to better understand the reasons of these disparities. Patients' perspectives on Kidney transplantation and nephrologists' practices are studied using Semi-structured interviews in three French regions.

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Uncovering gender bias in health services: the case of kidney transplantation

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Gender-based inequalities of access to health care are major public health issues. Studies performed in several countries and in some French regions showed that women had less access to kidney transplantation waiting list (KTWL) than men. Through a quantitative study based on REIN registry data, we analysed gender-based disparities in the access to KTWL in France. All incident patients who initiated dialysis from 2017 to 2019 and aged between 18 and 85 years old were included. Cox proportional hazard models, adjusted on age, comorbidities and neighbourhood deprivation level using European Deprivation Index (EDI), at national level and in all French regions, were performed. Among 29 395 patients who started