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Male or female urologist? Depends how much it hurts, research shows.

Urology involves some of the most intimate medical conditions, yet patients don't necessarily always prefer to be treated by a urologist of their own gender, new research has found.

In some situations, male and female patients would prefer a male urologist but in others – if they have a painful condition, for example – both men and women would choose to be treated by a female doctor.

The study, by researchers from University Hospital Munich, is being presented today at the European Association of Urology (EAU) Congress in Milan.

Based on a survey of over 1000 patients, the team found that around two thirds of patients expressed some preference as to the gender of their urologist.

Lead researcher Dr Alexander Tamalunas, from University Hospital Munich, said: "Previous research – including a survey we ran a few years ago – found that only around a third of patients have a preference as to whether their urologist is male or female. But these results were based on a single question on the subject.

"Our recent study is more nuanced, looking at whether patients attribute different skills to certain genders or what their choice would be depending on their own symptoms or in certain situations. That leads to a much higher number expressing a preference."

The study analysed questionnaires from 1012 patients visiting the hospital during 2021, around three quarters of whom were male and just under a quarter female. Three patients were non-binary – an insufficient number to allow the researchers to draw statistically significant conclusions as to the preferences of this group.

The cohort included patients of all ages – although the majority were over 60 – and from all educational and economic backgrounds. Patients were being treated for a range of conditions, and were asked about the impact of these on their lives, as well as whether they felt a male or female urologist would understand them better.

Overall, two thirds of patients expressed a preference for a urologist of a particular gender in at least one scenario – double the numbers found in previous research. In general, where patients expressed a preference, it was for a urologist of their own gender. However, there were certain scenarios where that didn't hold true.

Both male and female patients preferred to see a male urologist when their conditions were either: embarrassing; limited their daily activities; or caused them concern or inconvenience. However, both male and female patients with any condition with painful symptoms were more likely to choose a female urologist.

For both consultations and surgery, around a third of patients expressed a preference for a particular gender. Of these, the split was about 60:40 in favour of a male urologist for consultations, but this changed to 80:20 for operations.

Men were more likely to deem male urologists as having more practical skills than females, whereas women were more likely to think that a female urologist would be more empathetic.

Both men and women said urologists of their own gender would understand their body better and that it would be easier to talk to them about their condition.

Urology remains a male-dominated profession, but this study highlights the need for a more equal mix of male and female clinicians, say the researchers. University Hospital Munich has fairly equal numbers of male and female doctors in their urology department, but that's not the case in all hospitals, according to Dr Tamalunas.

"Urology involves very sensitive issues, such as erectile dysfunction, incontinence and genital infections, and these conditions are highly personal and sometimes embarrassing to patients," he said.

"Patients will already find it hard to speak openly to urologists about these conditions and this may be exacerbated by cultural sensitivities in some communities. It's vitally important that any additional barriers which we can control – such as the gender of the consultant – are removed and for that we need to encourage and support more women in the profession."

According to Dr Carme Mir Maresma, from the EAU Scientific Congress Office, these findings confirm her own experience.

"Patients' preferences for their urologist tend to depend on their condition," she said. "I mainly treat patients with cancer, who are often very ill, and they don't usually care about the gender of who is treating them, so long as they are well qualified. Patients with conditions that are not life-threatening may be more likely to express a preference.

"However, there are probably also cultural factors at play and it would be interesting to see this research replicated in other countries, to understand their influence.

"Urology is becoming more gender balanced, with fairly equal numbers of men and women at lower levels of the profession. Although men still tend to hold the majority of senior positions, I think that this will change over the next ten years."

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Notes to editors:

Gender bias in urology: How do patients really choose their urologist? will be presented at EAU23 in Milan on Saturday 11 March, 2023.

About EAU23

Europe's biggest urology congress will take place from 10-14 March 2023 in Milan, Italy. With over 1,500 abstracts presented and moderated live, the 38th Annual Congress of the European Association of Urology (EAU23) will be amongst Europe's biggest medical congresses in 2023. Review the full scientific programme on the congress website: eau23.org