

**B33**

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**Myocardial Infarction in Women: Incorporating Health Disparities into Medical School Curricula**

Cardiovascular disease (CVD) is the leading cause of death among women in the US. Compared to men, women with myocardial infarction (MI) experience more atypical symptoms, misdiagnosis, delayed treatment, morbidity, and mortality. Yet fewer than 1/3 of primary care providers feel equipped to assess CVD in women or educate them on CVD. This represents an important opportunity to increase health equity. We made changes to our second-year medical student curriculum focused on recognizing atypical MI symptoms and disparities in women's diagnosis, treatment, and mortality. This was informed by a literature review of MI in women and medical education focused on CVD in women. We incorporated this into 3 modalities: a lecture, a case study in a small-group problem solving class, and a lecture from a female MI survivor and advocate. These curriculum additions will be retained in the second-year student curriculum going forward.

We conducted pre- and post-surveys among students, with the post-survey limited to those who completed all three modules. The survey questions, consisting of both yes/no responses and a 5-point Likert scale, were designed based on the literature review. The pre-survey received 80 responses and the post-survey received 35. A descriptive analysis was performed in Excel. After attending these modules, students reported increased confidence in recognizing gender-specific MI symptoms and CVD risk factors as well as educating and advocating for women MI patients. A limitation of the project was the large discrepancy in pre- and post-survey responses, which may be due to the tendency of students to skip optional classes. This investigation demonstrated the methods through which training medical students in gender disparities can lead to a notable improvement in medical students' knowledge. This emphasizes the importance and effectiveness of incorporating health disparities in medical school curricula.