Man flu is related to health communication rather than symptoms and suffering

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Sue’s paper on “man flu” is an entertaining read.1 But we think that man flu is more likely due to men communicating their symptoms differently from women, rather than having different immune functioning.

In a study of 1700 people with the common cold, Macintyre found that men over-rated their symptoms compared with a clinician’s judgment more often than did women (20% v 14%).2 But the cross-sectional nature of the study did not enable elucidation of whether this was due to men being less tolerant of sickness symptoms, more likely to complain about them, or whether the clinicians were more likely to underestimate symptoms in men. Data on sex differences in suffering are mixed,23 but the majority of studies find few or no differences in symptom ratings between men and women for acute infections.4

We recently injected healthy men and women with a bacterial endotoxin, causing systemic inflammation and flu-like symptoms.5 Men and women showed similar symptomatology, and they moaned and complained equally. But sick men, not women, increased their frequency of sighs and deep breaths. Given that sighs and deep breaths likely serve communicative functions,6 this indicates that men and women communicate symptoms differently. Notably, we examined communication towards only female carers.

Health communication is highly dynamic, and facial features and smell can be used by laypeople to detect acute sickness.78 Doctors can use such abilities to improve diagnostic accuracy rather than to under-rate symptoms in men, as suggested by Macintyre.2

In all, the concept of man flu should be further scrutinised in terms of sex differences in non-verbal communication. At present, it is the omnipresence of the concept, rather than empirical support, which
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Footnotes

- Competing interests: None declared.

References


