



Women and Heart Attacks

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Head disease is the leading cause of death for women in the United States. There is a common misperception that heart disease is a man's disease, but the same number of men and women die of heart disease each year. In 2009, >290 000 women died of heart disease, one-fourth of all deaths in women. Heart disease encompasses a broad spectrum of disease that includes heart attacks, irregular heart rhythms, and heart failure. We will focus on coronary artery disease and heart attacks.

Are You Aware?

A 2012 American Heart Association survey of 2300 women found that only 56% of women identified heart disease as the leading cause of death in women. This was a marked improvement from 30% in 1997, but highlights that almost half of women still do not recognize the threat of heart disease to their health. Awareness is lower among ethnic minority women, with fewer than half of black and Hispanic women correctly identifying heart disease as the leading cause of death in women.

Risk Factors for Heart Disease

Recognizing major risk factors for heart disease is important to help make

changes that could potentially prevent serious events like a heart attack. Risk factors for heart disease are similar for both men and women. However, some risk factors may confer even greater risk in women.

Modifiable risk factors:

- Smoking
- Physical inactivity
- Unhealthy diet
- Obesity
- Diabetes mellitus and prediabetes
- High blood pressure/hypertension

Nonmodifiable risk factors:

- Age (≥ 55 years)
- Family history of early heart disease
- History of preeclampsia during pregnancy

Finally, other risk factors such as hormones and depression are also being investigated. It is well established that the risk of heart disease in premenopausal women is lower than in men of the same age. However, after menopause and as we get less young, the risk of heart disease becomes similar between sexes. Depression has been recently recognized as a potential risk factor for the development of heart

disease. Because women experience higher lifetime rates of depression than men, women should recognize the importance of maintaining good mental health through exercise, diet, and social networking.

Warning Signs of a Heart Attack

Every woman should recognize the signs and symptoms of heart attack to know when to summon emergency medical assistance. The classic signs of a heart attack include central chest pain or pressure that radiates to the left arm and jaw. However, in women, the signs of a heart attack are often less obvious, such as shortness of breath, back and abdominal pain, and nausea.

If you are experiencing any of these signs or symptoms, please call 9-1-1 immediately for emergency medical attention. You should never drive yourself to the hospital.

What to Discuss With Your Doctor if You Have Already Experienced a Heart Attack

Many therapies may improve your survival after a heart attack and reduce your

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chances of having a second cardiovascular event such as heart attack or stroke. Many studies have shown that women are less likely than men to receive some of the therapies with proven benefit. Therefore, if you have experienced a heart attack, you should review your list of medications with your cardiologist to see if any additional therapies may be appropriate for you.

Examples of some of these medications include:

- Aspirin
- β -Blockers
- Angiotensin-converting enzyme inhibitors or angiotensin receptor blockers
- Statins or other cholesterol-lowering drugs such as ezetimibe

It is important that you take all medications as prescribed. If you have any difficulty obtaining your medication (for instance, because of cost or access to the pharmacy) or if you think you are experiencing a side effect, please contact your physician immediately. You should not discontinue any medications without first consulting your physician.

After a heart attack, there are many lifestyle changes you should adopt as well. Most importantly, if you have been

a smoker, you must quit immediately! Your doctor may be able to provide strategies to help you quit. You should also ask your doctor about enrollment in a supervised physical activity program known as cardiac rehabilitation. In general, you should perform at least 30 minutes of moderate intensity aerobic activity 5 times a week or 25 minutes of vigorous aerobic activity 3 days a week PLUS moderate- to high-intensity muscle strengthening at least 2 days a week, as long as permitted by your doctor. You should also focus on eating a well-balanced diet, including fruits, vegetables, whole grains, poultry, fish, and nuts, while limiting red meat and sugary foods and beverages. Finally, all patients who have had a heart attack should be vaccinated against the flu every year. You should speak with your physician to see if other lifestyle modifications may be helpful for reducing your risk of another heart attack.

Disclosures

None.

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