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Maintaining Heart Health is Important for Women

Mention February, and thoughts of love, flowers, and lacy valentines come to mind, so it is no surprise that February is also National Heart Month. For the past few years, the American Heart Association has placed the focus on women and heart disease, because although cardiovascular disease is the leading cause of death for all adults in this country, the fact is that more women die from this condition than men every year. Compared to all other causes of death, heart disease is by far the number 1 killer of women, and stroke is the 3rd leading cause of death for women. According to the American Heart Association, over 480,000 American women die from cardiovascular disease every year, which is about 1 death every minute, and 61% of stroke deaths occur in females. Not only is heart disease the leading cause of death for all women, but it is the 2nd leading cause of death for women in the 45-64 year age bracket, and the 3rd leading cause of death for females between 25-44 years of age.

In a review of cardiovascular disease trends, the Mayo Clinic points out that while deaths related to heart disease have declined for both sexes over the past 40 years, the decline has been considerably greater for men. Further, the incidence of heart attacks in women has been increasing for the past 10 years. Unfortunately, most of the research that had been conducted in the past was concerned with heart disease in men (about 75% of all heart and vascular research). Only recently has the scientific and medical community begun to study cardiovascular disease in women, and a number of gender differences have been revealed. The Women's Heart Foundation notes the following:

- Plaque builds up in clumps in men, but is more evenly distributed throughout the artery walls in women. As a result, it often does not show up in angiograms in women and their tests are misinterpreted as "normal." (A recent study conducted by the National Institutes of Health revealed that as many as 3 million women who have been diagnosed with healthy arteries may actually be at risk after all, because angiograms do not pick up plaque buildup in the smaller coronary arteries of women's hearts.
- Women wait longer to go to the emergency room because their symptoms are more vague and they do not realize they are having a heart attack. Further, physicians also take longer to recognize a heart attack in women.
- Following a heart attack, women are less likely to receive ACE inhibitors, beta blockers, and aspirin therapies than men. Also, women who are eligible to receive clot-buster drugs are far less likely to get them than men.
- Women are 2 times as likely to die within a few weeks of a heart attack than men are, and over twice as many women as men will be disabled with heart failure within 6 years.
- Bypass surgery is more successful for men. Women are 2 to 3 times more likely to die from bypass surgery, and women aged 40-59 are 4 times more likely to die than males of the same age.

-- 38% of women and 25% of men die within one year of the first recognized heart attack.

-- Women are less likely to receive cardiac catheterization to determine the optimal course of treatment.

Multiple sources have recognized that women often have different symptoms than men when a heart attack strikes. While the most common symptom associated with heart attack is pain, pressure, or discomfort in the chest, the Food and Drug Administration states that the most important sign for women is feeling extremely fatigued, even after a good night's sleep. Women often experience a sudden onset of weakness that feels like the flu, and they are more likely to have a heart attack without chest pain than men. Women are apt to have symptoms such as difficulty breathing, trouble sleeping, nausea or vomiting, feeling scared or anxious, worsening headaches, pain in the back between the shoulders, pain above the navel, sweating, and chest pain or tightness that spreads to the jaw, neck, ear, shoulders, or the inside of the arms. No doubt this list of seemingly unrelated problems contribute to the inability of both women and physicians to accurately diagnose a female's heart attack, partially accounting for the fact that women are more likely to die in the hospital following a heart attack than men are.

There is good news for women, however. Heart disease is not an inevitable result of aging, but is largely preventable by adopting a healthy lifestyle. According to the Women's Heart Foundation, "women's hearts respond better than men's to healthy lifestyle changes." If more emphasis is placed on treating risk factors like high blood pressure, high cholesterol, diabetes, obesity, and exposure to tobacco smoke, women may be able to lower their risk of developing cardiovascular disease. Managing stress effectively, being physically active, reducing salt intake, and eating healthily are additional ways to reduce the threat of cardiovascular disease.

The Central Connecticut Health District will offer two different educational programs (one for women aged 40-60, the other for men and women over age 18) about heart health and managing cholesterol levels this March and April. Dates and times will be announced later, and will be available by contacting the Health District at 860-721-2822 (www.ccthd.org.) Further information about women's heart health can be obtained from the National Coalition for Women with Heart Disease at 202-728-7199 (www.womenheart.org) and the Women's Heart Foundation (www.womensheartfoundation.org).