

Spotlight on Health

Women's Heart Health

Many women think that heart disease is a man's problem. But heart attacks kill more women each year than cancer. Yet many women don't know that they are at risk. In this month's Spotlight on Health, we talk about why heart disease is a problem for women and what can be done to deal with it.

Heart Disease in Women vs Men

The number of deaths from heart attack is decreasing for men. But the number is increasing each year for young women (<55 years). Women are also more likely to die within 1 to 5 years of having a heart attack. If they survive, women have a harder time recovering than men. There are 3 main reasons for these differences¹⁻³:

- Risk factors are more common in women who have heart attacks. These risk factors include
 - Poor diet
 - Lack of exercise
 - High blood pressure
 - High cholesterol
 - Smoking (young women)
 - Kidney disease
 - Depression
- Delays in treatment: women can have very different symptoms. These symptoms might not be recognized as signs of a heart attack, so women don't always seek treatment right away. Women are more likely to have
 - Sharp, stabbing, or burning chest pain instead of crushing chest pain
 - Fatigue and shortness of breath
 - Upper back, stomach, neck, jaw, arm, or shoulder pain
 - Flu-like symptoms
 - Dizziness
 - Anxiety or weakness
 - Indigestion
- Follow-up care isn't as intense. For example
 - Drugs that help stop future heart attacks are ordered less often for women.
 - Women are less likely to be counseled about heart-healthy exercise and diet.
 - Women are also less likely to be counseled about smoking and stress reduction.



Managing Stress

The American Heart Association® offers some suggestions on how you can manage stress. These include

- Positive self-talk
 - “I've got this.”
 - “I can get help if I need it.”
- Emergency stress stoppers
 - Count to 10 before you speak.
 - Take three to five deep breaths.
- Finding pleasure
 - Do a hobby or activity that you enjoy.
 - Relax with friends and family.
- Daily relaxation
 - Try yoga, tai chi, or meditation.
 - Imagine yourself in a peaceful place.

For other suggestions see: [Four Ways to Deal with Stress](#)

Heart Disease in African American Women

African American women are more likely to die from a heart attack than women of other races.¹ The reason for this difference may be risk factors. More African American women have high blood pressure and diabetes than white women. Stress and depression caused by low income also affect more African American women.⁴

What Can You Do?

There is a lot you can do to lessen the chances of having a heart attack. Your doctor can advise you. He or she might tell you to

- Stop smoking.
- Eat more vegetables, fruits, and whole grains and less sugar and red meat.
- Exercise 3 to 4 times per week. Forty minutes of exercise can lower blood pressure and cholesterol. But even 10 minutes of exercise can help improve your health.
- Manage your stress (see sidebar on page 1).
- Limit alcohol intake.

For more information see [Lifestyle Changes for Heart Attack Prevention](#).

If you do have a heart attack, you can improve your chances of survival and recovery. You can

- Know the symptoms and get medical help right away (watch this [video](#) from the American Heart Association® Go Red for Women® heart disease awareness campaign).
- Take medicines, like statins and aspirin, as directed by your doctor. They will help stop you from having another heart attack.
- Ask your doctor about cardiac rehabilitation programs.

How Quest Diagnostics Can Help

Quest offers tests to help find out if you are at risk of heart disease. Test results for cholesterol are combined with information about you to calculate the risk that you'll have a heart attack in the next 10 years. This information includes your age, sex, race (African American or not), blood pressure, and smoking status. If you've already had a heart attack, Quest offers tests that let the doctor know how you are doing with treatment.

References

1. Mehta LS, Beckie TM, DeVon HA, et al. Acute myocardial infarction in women: a scientific statement from the American Heart Association. *Circulation*. 2016;133:916-947.
2. Xu X, Bao H, Strait K, et al. Sex differences in perceived stress and early recovery in young and middle-aged patients with acute myocardial infarction. *Circulation*. 2015;131:614-623.
3. Graham G. Acute coronary syndromes in women: recent treatment trends and outcomes. *Clin Med Insights Cardiol*. 2016;10:1-10.
4. Sumner JA, Khodneva Y, Muntner P, et al. Effects of concurrent depressive symptoms and perceived stress on cardiovascular risk in low- and high-income participants: findings from the reasons for geographical and racial differences in stroke (REGARDS) study. *J Am Heart Assoc*. 2016;5:e003930.