

Women and Heart Disease

Neil F. Gordon, MD, PhD, MPH, Medical Director, Center for Heart Disease Prevention, Savannah, Georgia and INTER_xVENT^{USA}.

If you stop to think about it for a few moments, we have witnessed many amazing technologic advances in the field of cardiovascular medicine in our lifetime. One that stands out clearly in my mind is the first heart transplant, performed in 1968 by the late Prof. Chris Barnard in South Africa – where I am originally from. Despite these impressive technologic advances, heart disease and stroke, which in most cases are potentially preventable, remain by far the leading cause of death in the United States. Moreover, on the basis of recent negative risk factor trends – such as an alarming increase in the prevalence of obesity and type 2 diabetes – it does not appear that the situation is likely to improve significantly in the very near future.

As we have already heard from Mrs. Bush, cardiovascular disease is devastating to women as well as men. Women simply run a risk for heart disease that lags 10 years behind that of men. In other words, a 55-year old woman has a similar risk for heart disease as a 45-year old man. As we have also already heard, cardiovascular disease kills more American women than men each year, and the gap between female and male deaths from cardiovascular disease may be widening.

This is not very surprising when you consider these facts and statistics:

- While both men and women with heart disease may develop the classic symptom of chest discomfort, women are more likely to experience atypical symptoms such as shortness of breath, unexplained fatigue, or a feeling that they have a bad case of indigestion. Women are less likely to interpret their symptoms as being heart disease-related and may avoid or delay seeking life-saving medical care. Equally important, their doctors are more likely to attribute women's symptoms to non-cardiac causes and, in the process, put off ordering necessary tests or fail to treat them appropriately. Certain diagnostic tests, for example treadmill stress tests, may be less accurate in women than in men. Certain procedures that are used to treat heart disease may be more challenging to perform in women. For example, it may be more difficult to perform an angioplasty to unclog a blocked coronary artery in some women, for a variety of reasons, including the fact that they may have smaller coronary arteries than men.
- Among adult American women, over 20% continue to smoke cigarettes, over 50% lead a sedentary lifestyle, and almost two-thirds are overweight or obese. An estimated 6 million American women have physician-diagnosed diabetes, an estimated 3 million have undiagnosed diabetes, and another 6 million have pre-

diabetes. Over 30% of women have high blood pressure and over 55 million American women have high cholesterol. These are all major risk factors for heart disease and stroke. As I mentioned earlier, the situation does not appear to be improving.

So what can we do about this? Women need to know the warning signs of heart disease and stroke and what to do if they experience them. Women need to have appropriate screening tests to know what risk factors they have for heart disease and stroke and learn what the desirable goal levels are for these risk factors. Finally, women need to improve or manage their risk factors through a combination of comprehensive health lifestyle changes – regular exercise, correct nutrition, weight management, and not using tobacco, for example – and, where appropriate, drug therapy – for example, to help manage high cholesterol, high blood pressure, and diabetes.

The St. Joseph's/Candler Health System offers some of the finest programs in the nation to help women identify and manage risk factors for heart disease and stroke. Indeed, the lifestyle management and cardiovascular disease risk reduction programs pioneered by the health care system together with INTER_xVENT^{USA} are now being administered in affiliation with many other leading healthcare systems in over 20 states in the U.S., and throughout North America using innovative approaches such as the telephone and the Internet. **A recent multi-center research study coordinated by researchers from the St. Joseph's/Candler Health System and our affiliate, INTERVENT, shows that women can derive similar benefits to men by participating in heart disease and stroke prevention programs. Therefore, in honor of National Heart month St. Joseph's/Candler will kick off an exciting free program on Valentines Day offering women in our service area access, free of charge via our website, to a variety of scientifically-based self-help lifestyle management and heart disease/stroke prevention programs. The INTERVENT programs have been proven to help women improve multiple cardiovascular disease risk factors.**

It is our belief that American women can win the war against heart disease and stroke. To do this, it will take a major effort on all of our parts – as individuals, as healthcare systems, and as communities. The St. Joseph's/Candler Health Care System applauds Mrs. Bush for leading the charge through her commitment to the Heart Truth Campaign and we invite all women in Savannah and the surrounding areas to join us in this critically important initiative.

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