

WHY ARE WOMEN SO VULNERABLE TO HEART DISEASE?

By Salvatore Trazzera, MD, FACC, FACP, FCCP



Several years ago I was caring for a man in my office who had just sustained a heart attack and endured coronary bypass surgery. We were going over his post-operative plan including reviewing medications, diet and what he could anticipate in his recovery and cardiac rehabilitation. As I had encountered many times in the past with patients his wife was at his side. She began to tell me how this gentleman was not following his diet, he wasn't exercising as he had been instructed and he was considering smoking again. After several minutes of listening to her chastise her husband we completed his office visit and something occurred to me. I turned to this middle aged woman, who was moderately over weight I might add, and asked her "Mrs. Jones, when was the last time you had your cholesterol checked?", and "have you had a stress test lately?" She answered me with a momentary blank stare, and when she did finally reply she said "I've never had my cholesterol checked. My doctor has never suggested I do" And, finally, "Why would a woman need a stress test? Women never get heart attacks. Isn't that a man's disease?!" Suddenly it occurred to me. Women and many physicians don't consider heart disease to be an issue for women. Over the next several weeks I asked many women the same questions I had asked my patient's wife. Invariably I received similar answers.

Since that time, very early on in my career as a cardiologist in private practice, I have been interested in understanding more about a phenomenon which has only recently gained public awareness—Cardiovascular disease in women. I have continued to study how cardiovascular disease affects women and their families; what are the similarities and differences, both clinically and biologically, of cardiovascular disease in men and women. Women are clearly different than men in many ways but now it had never been more apparent to me. I began to observe the differences in how women perceived themselves during and after a cardiac event or encounter in a cardiology office; how differently they communicated their symptoms to me than men did; how they became depressed, withdrawn and often felt guilty after sustaining a heart attack, stent or bypass surgery. Many women were accustomed to being in control of their very full lives, functioning as care givers to their spouses, children, grandchildren and aging parents.

Many of these women had full careers as well. I observed inordinate amounts of anxiety and difficulty coping with all of these different stresses. It became more apparent to me that caring for women with cardiovascular disease would mean serious modification in my approach. I learned to listen more... and amazingly I heard and understood much more.

Symptoms of heart disease are frequently different in women than in men. Women often don't volunteer information, such as experiencing typical chest pain or pressure; the common feeling of discomfort, fullness, tightness, squeezing or pressure in the center of the chest. They more frequently present with shortness of breath or difficulty breathing, fatigue, malaise or lassitude. A heart attack or angina may present as stomach or abdominal pain in a woman, dizziness or nausea or unexplained feelings of anxiety, fatigue or weakness—especially with exertion. I frequently have seen women present with repeated belching or fainting and loss of consciousness.

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In my quest to learn more about heart disease in women and the importance of educating women on this number one killer, I have partnered with several national organizations to increase public awareness about American women's greatest public health concern. Important patient organizations such as 'WomenHeart- The National Coalition for Women with Heart Disease', (www.womenheart.org). The coalition is the nation's only patient advocacy organization that represents 8 million American women living with heart disease and aims to improve their quality of life and cardiac health through support, information and advocacy. 'The American Heart Association' through the 'Go Red for Women Campaign' (www.americanheart.org). and 'The Heart Truth, The National Heart Lung and Blood Institutes public awareness program for women with cardiovascular disease' (www.nhlbi.nih.gov/heart-truth/material/index.htm).

Cardiovascular disease is the number one killer of American women claiming nearly one half million lives per year. It contributes to the death of more women than the next seven diseases combined. Including breast cancer, lung cancer and gynecologic cancer. It causes countless stress on the American family. Despite an

overwhelming prevalence of cardiovascular disease, women undergo fewer diagnostic and therapeutic procedures. Historically women comprised only 20-30% of patients in research studies on heart disease. Physicians and researchers see the need for much closer examination of gender differences specific to cardiovascular disease. World leading cardiovascular organizations such as the American Heart Association (AHA) and The American College of Cardiology (ACC) are addressing this need. At this year's American College of Cardiology's Scientific Sessions several mini courses were available to educate physicians on these gender specific differences. The ACC/AHA recently released "Evidence Based Guidelines for Cardiovascular Disease in Women." This document provides guidance to physicians on how to approach women with existing cardiovascular disease, or who are at serious risk for cardiovascular disease. The National Heart Lung and Blood Institute is conducting ongoing research. The American Heart Association recently conducted the Second International Conference on 'Women, Heart Disease and Stroke.' Many questions are yet to be answered.

Several years ago 'The Women's Institute for Cardiovascular Care' was born—A pioneering program in the prevention, diagnosis and treatment of heart and cardiovascular disease in women. 'The Women's Institute for Cardiovascular Care' was conceived to improve the cardiovascular health of women. A multidisciplinary approach provides access to the most up to date preventive, diagnostic and therapeutic modalities for women who have known or suspected heart or cardiovascular disease. The program provides an approach which is sensitive and compassionate to women's needs. A comfortable dialogue of important issues such as menopause, hormone replacement therapy, anxiety, depression, exercise, diet and weight control accompany the traditional heart related issues typically discussed at a cardiovascular consultation. Women evaluated in this program will receive a comprehensive evaluation including risk assessment and educational materials.

In partnership with WomenHeart the program provides access to a support group for women who have suffered the trauma of a cardiovascular event such as a heart attack, stroke, stent or bypass surgery. The group meets twice a month. The program participates in local public education programs related to cardiovascular disease in women. Dr. Trazzera is available to speak for women organizations.

You or someone you are close to may be at risk for cardiovascular disease. Be proactive. It may be time for a cardiovascular risk assessment. ^a

If you would like to learn more about heart disease in women, contact Dr. Salvatore Trazzera at The Huntington Heart Center, 172 East Main Street, Huntington 631-385-0022 or at The Long Island and Women's Institute for Cardiovascular Care, 206 Fallwood Parkway, Farmingdale, 516-249-1020. Join Dr. Trazzera on April 14th as he moderates a Women's Heart Educational Lecture at The Dolan Center in Huntington. Free registration is required-call 631-351-7040 ext.0.