

Daily Union Article
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Title: Heart Disease in Women

Heart disease is the top cause of death for women – just as it is for men. For some reason, many have the misperception that it is more common in men. In reality, among women 65 and older, heart disease accounts for about a quarter of all deaths. If you add in deaths due to stroke, the amount rises to nearly one third. Compare that to the percentage of deaths due to cancer, which currently rests at about 19% for women over the age of 65.

Recent increased efforts in educating the public about these statistics and the impact heart disease has on women has made a positive impact on reducing the risk for heart disease in this demographic. In the July 2017 Mayo Clinic Health Letter, it was reported that in the past 15 years, the number of American women dying of heart disease has declined significantly.

By helping the public, especially women, understand more about heart-health risks people are more motivated to take seriously the medical steps and lifestyle changes that can greatly reduce their risk of heart disease.

Too often, we associate heart disease with the more familiar risks: smoking, high blood pressure, undesirable cholesterol levels, diabetes, obesity, and lack of physical activity.

With women, though, these familiar risks take on a different look than they do for men. The following information about how these risks apply specifically to women was compiled from the Mayo Clinic Health Letter previously cited.

Smoking – the combination of oral contraceptive use and smoking appears to increase risk of coronary artery disease (CAD) by about 25% over the already high risk of the disease that male smokers experience. Research shows that women also have a more significant degree of risk at less cigarette use than compared with men.

Hypertension (high blood pressure) – Data shows that there is a higher prevalence of high blood pressure in women older than 60 than in men of the same age. Additionally, blood pressure is often less well-controlled in women than in men.

Cholesterol – Although younger women tend to have healthier cholesterol levels than young men, once women have been through menopause, unhealthy levels of cholesterol in women rise to higher levels than men of the same age.

Obesity – There is a body of research that indicates the risk of CAD in obese women is higher than in obese men. This research also shows that fat stores in the abdomen poses a greater risk than fat located on the hips, thighs, and buttocks.

Inactivity – As a general rule, women are less active than are men.

A person diagnosed with CAD is at risk for an eventual heart attack, heart failure or potentially deadly heart rhythm problems. Atherosclerosis can occur in other arteries such as those that supply blood to the brain which increases the risk of stroke.

Females have some additional risks for CAD beyond those previously mentioned.

Reproductive issues – Pregnancy issues that can predict increased risk of CAD as a woman ages include pre-term delivery, high blood pressure conditions such as preeclampsia, gestational diabetes, or weight gain with pregnancy that doesn't go away within the first year after birth. The risk of CAD increases when a woman is diagnosed with polycystic ovary syndrome, as well.

Autoimmune diseases – The diseases that are associated with higher levels of inflammation, like rheumatoid arthritis, raise the risk of CAD.

Breast cancer – Treatment methods used with breast cancer, such as chemotherapy drugs, and radiation performed very close to the heart, have been found to increase the risk of CAD, as well.

Early menopause – As a woman moves through menopause and beyond, her CAD risk increases. For women who experience menopause early, the CAD risks become greater at an earlier time than for women who experience menopause later.

Depression – Admittedly this is a risk factor for both men and women. However, depression is more common in women.

Women need to be aware of the more common risks for CAD as well as those risks that are more specific to their gender. For many women, heart disease should be at the top of their list of health concerns – especially in older women. Some of the risks can be controlled or modified. By knowing what these risks are, women can be proactive in reducing their risk for CAD.

Making lifestyle changes sooner, rather than later will increase the chance that a woman can avoid CAD. These lifestyle changes could include not smoking, maintaining a healthy weight, eating a healthy diet rich with vegetables, whole grains, and fruit, drinking alcohol in moderation, and getting regular exercises.

For more information on making healthy lifestyle changes, contact me at the Geary County K-State Research and Extension office at 785-238-4161. Until next time, keep living resourcefully!

