

The Patient Channel Presents: Heart Disease: Women at Risk

Currently 8 million American women are living with heart disease. Once believed to be just a man's illness, heart disease and heart attacks are actually more severe in women than men.

Hello, I'm Doctor Colleen Conway-Welch, Dean of the Vanderbilt University School of Nursing. Heart disease is the leading cause of death of American women. Unfortunately, most women don't recognize the signs of heart disease or a heart attack, and many healthcare professionals may not identify the symptoms early enough.

That's why it's crucial for every woman to know what to watch for and how to make the right lifestyle changes. .Heart Disease: Women at Risk. will show you what you need to know about keeping cholesterol levels and blood pressure in check. We will arm you with the information you need to reduce your risks and prevent this unnecessary killer.

Natural Sound:

Jennifer H. Mieres, MD: .You took your medicines today, right?.

Narrator

It can sneak up on a woman, sometimes with confusing symptoms.

Connie Burt

Patient

"I thought it was indigestion, like a squeezing, and I would walk a few steps and then have to stop and rest. But I never thought that it was a problem with my heart."

Narrator

Like many women, Connie Burt discovered by chance she was living with heart disease. The routine tests she underwent before her toe surgery revealed something might be wrong with her heart. Lucky for Connie, she works in the cardiology department at North Shore University Hospital, in Manhasset, New York. Her colleague, Doctor Jennifer Mieres, is the director of nuclear cardiology at the hospital. She says it's common for women, and even some physicians, to miss the warning signs of heart disease.

Jennifer H. Mieres, MD

North Shore University Hospital, NY

"When we looked at the cardiogram and I spoke to her and heard about her symptoms, recognized that there was a minor abnormality on her cardiogram that could signal maybe silent heart disease, and made us think that maybe her heartburn, which came with exertion, which came when she was under stress, was really related to heart disease."

Narrator

If you were to ask women what they thought their greatest personal health threat was. many would tell you breast cancer. But in fact, heart disease is responsible for more deaths in women than all forms of cancer combined.

Jennifer H. Mieres, MD
North Shore University Hospital, NY

"A 60 or 65 year old woman is about 20 times likely to have heart disease or die from heart disease compared to breast cancer."

Narrator

Here's a couple more startling statistics: an estimated half million women die from heart disease every year. More women will die from a first heart attack than men. It's these sort of numbers that have prompted scientists and physicians to focus more energy on specific reasons why and how heart disease affects women differently than men.

Jennifer H. Mieres, MD
North Shore University Hospital, NY

"So, in 1990, U.S. Congress looked at the statistics, looked at the CDC statistics and issued a mandate to the National Institutes of Health that we needed to start studying gender-specific aspects. And we needed to decrease the mortality from heart disease in women."

Narrator

As researchers are learning more about heart disease in women, it's becoming even more important for women to take the time to take care of themselves. Being an advocate for your own health starts with knowing what you're up against. Heart disease can result from a number of factors. Some issues are within a woman's control, such as: not smoking, avoiding second-hand smoke, maintaining a healthy weight, eating a balanced diet, keeping healthy cholesterol levels, controlling blood pressure, managing diabetes if you have it, and engaging in regular physical activity.

JoAnn E. Manson, MD, DrPH
Brigham and Women.s Hospital, MA

"And in many ways, we've made progress with these risk factors, there's better detection and treatment of high blood pressure and better detection and treatment of high cholesterol. However, we're going in the wrong direction in terms of obesity and sedentary lifestyle and diabetes. And those risk factors have actually been increasing in frequency over time."

Narrator

Diabetes is an important condition that will increase anyone's likelihood of developing heart disease. It's become such an important factor; the American Heart Association and the American Diabetes Association are teaming up to educate the public of the link between the two conditions.

Jennifer H. Mieres, MD
North Shore University Hospital, NY

"You have the plaque building up at a much more rapid rate if you're diabetic, especially an uncontrolled diabetic, and so putting you at risk for heart attacks and other aspects of cardiovascular disease."

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Narrator

Family history is one factor that can't be controlled. But it plays a significant role in determining heart disease risk. Men and women are both more likely to develop heart disease if their close blood relatives have the condition at an early age...55 for men and 65 for women. Age itself is another factor for both men and women. Heart disease risk increases with age, although women typically present with the first signs of heart disease 10 years later than men.

Narrator

Sometimes women have clear symptoms of heart disease, but neither they, nor their doctors recognize them.

Richard A. Stein, MD

Beth Israel Hospital, NY

"Very often, women will have heart attacks, that we call silent heart attacks, at home. But in fact they're not silent. They're just presenting so differently that neither the woman nor her physician were aware of the fact that they could be a heart attack."

Natural Sound:

Nurse: "Mary Pascal, come on back."

Narrator

Mary Ann Pascal knows how vulnerable she is, but almost found out too late. She just didn't fit the profile of a person at risk for heart disease. An outgoing, friendly woman in her forties, who likes to exercise, Mary Ann has always considered herself healthy. But a nagging breathlessness kept bothering her.

Mary Ann Pascal

Patient

"I began to complain about walking on an incline, up from the boat or upstairs. Not running on a treadmill or, that did not effect me, but on an incline. And I became very tight in the chest, short of breath, and in my neck. And I just was winded, completely winded."

Narrator

She went to several doctors, and had several different tests. They all were normal. Finally her last doctor did a cardiac catheterization and discovered a major blockage. She was immediately scheduled for emergency bypass surgery.

Mary Ann Pascal

Patient

"I was in critical condition. On death's door, very much on death's door, and was rushed in for open-heart surgery. Triple, quadruple, but ended up with triple bypass."

Narrator

Mary Ann now takes cholesterol lowering and blood pressure lowering medications, and she's become a volunteer at the American Heart Association. Her mission: to convince other women that they, too, are at risk for heart disease.

Mary Ann Pascal

Patient

"I feel like I've been given a second chance, and I, but I feel like it is my responsibility to take control of my own health. It's your choice, so if you've been through something like this and you choose to return to the habits that maybe brought them on, then that's a choice, that's a sad choice but it's a choice..

Narrator

There are more differences between men and women than meets the eye, especially when it comes to recognizing a heart attack. When we return, we'll show you the signs and symptoms to watch out for.

Natural Sound:

Jennifer H. Mieres, MD: "Any chest pain?"

Connie Burt: "No."

Narrator

Connie Burt is in the middle of a stress test.. It's an exercise test that allows doctors to check for underlying coronary artery disease or blockages.. Patients who are healthy enough will walk on a treadmill while they wear a monitoring device. Patients unable to exercise may be given a medicine that can mimic the effects of exercise. Connie's stress test revealed a large area of the heart not getting enough blood supply during exercise.

Connie Burt

Patient

"So, the doctor scheduled me for the catheterization, and they saw that there was a blockage."

Narrator

Though Connie makes it sound simple, cardiac catheterization is a procedure where doctors take a look at a patient's arteries to see if any blockages exist. They found one, and it was serious. The main artery delivering blood to the left side of the heart was almost completely blocked.

Jennifer H. Mieres, MD

North Shore University Hospital, NY

"I think, you know, in many ways, identifying her heart disease, even though it was advanced heart disease because the blockage was about 90 to 95 percent, saved her from having a massive heart attack, and probably saved her from dying from a heart attack or dying from heart disease."

Natural Sound: Connie: Okay?

Narrator

Some women aren't as lucky as Connie to catch heart disease before it causes a problem, such as a heart attack. Heart attack warning signs in both men and women include:

pain or discomfort in the center of the chest, or other areas of the upper body including the arms, back, neck, jaw or stomach. Other symptoms include shortness of breath, breaking out in a cold sweat, nausea or light-headedness. As with men, women's most common heart attack symptom is chest pain or discomfort. But women are somewhat more likely than men to experience some of the other common symptoms, particularly shortness of breath, nausea and vomiting, and back or jaw pain.

Richard A. Stein, MD

Beth Israel Hospital, NY

"More often than men, women will come in having said, 'I got this profound sense of weakness. I broke out in a sweat, I was short of breath and I couldn't understand why. I felt irregular heartbeats, I felt a sense of nausea and a burning pain in my stomach.. Now those can be heart disease in a man as well, but far more likely, heart disease in a man is going to be that kind of midline pressure pain, the so-called squeezing fist that we sort of use to give you a picture of what it feels like."

Narrator

But the genesis of heart disease is the same for anyone. A healthy heart pumps blood freely throughout the body. The coronary arteries supply blood to the heart. A buildup of fat-like substances, known as plaque, can narrow the arteries. The plaque may burst, tear or rupture, creating an area where a clot forms, reducing blood flow to the heart, causing a heart attack. When the heart muscle doesn't get enough blood, heart tissue can die. A woman's race can also play a role in heart health. On average, heart disease is more prevalent in African-American women, who are more likely to die of heart disease than Caucasian women. Doctors say African-American women are more likely to experience high blood pressure, obesity and diabetes, all serious risk factors for heart disease.

Jennifer H. Mieres, MD

North Shore University Hospital, NY

"So African-American women need to know that they're at risk, that simple lifestyle changes can definitely have a powerful impact in reducing the death rate in African-American women from heart disease..

Narrator

It may be a combination of women not recognizing their symptoms and a caregiver mentality that prevents some women from getting symptoms checked out.

Jennifer H. Mieres, MD

North Shore University Hospital, NY

.We figure out, let's get the household chores completed before we worry about ourselves. And you know, we need to change our mindset..

Richard A. Stein, MD
Beth Israel Hospital, NY

"If you get to an emergency room quickly, we can actually open up that coronary artery, reperfuse blood and save a lot of the heart that would have otherwise been lost. And that's buying good years added onto your life."

Narrator

Connie says she's grateful she got the chance to catch her heart disease early. Coming up... hormone therapy and heart disease. We'll give you an update on the latest research.

Narrator

Meet Maria Bueche. She's an active, 65-year-old grandmother. While retirement is definitely entering her mind she's happy to be working full-time as a nurse practitioner outside of Boston, Massachusetts. Being post-menopausal herself, Maria is familiar with the symptoms of the change of life."

Maria Bueche
Patient

"These hot flashes and night sweats were so bad, that I decided to take hormone medication."

Narrator

In the past, doctors routinely prescribed hormone therapy as a way to help alleviate symptoms of menopause, and lessen the risk of cardiovascular disease, since the decrease in estrogen that occurs at menopause had been linked to increased risk of heart disease.

However, recent findings of a long-term study, sponsored by the National Institutes of Health, known as the Women's Health Initiative, have dramatically changed the understanding of the benefits and risks of hormone therapy.

JoAnn E. Manson, MD, DrPH
Brigham and Women's Hospital, MA

"The pendulum has swung from hormone therapy being considered good for all women to now, hormone therapy being considered bad for nearly all women. And in fact, that may be an oversimplification as well. The truth is probably somewhere in between."

Narrator

JoAnn Manson is the chief of preventive medicine at Brigham and Women's Hospital in Boston. Much of her work focuses on the Women's Health Initiative, which was the first large-scale, randomized clinical trial of hormone therapy in primary prevention of heart disease, stroke and other health issues.

JoAnn E. Manson, MD, DrPH
Brigham and Women's Hospital, MA

The Women's Health Initiative showed that women who were, on average, in their early 60.s, and at least 10 years past menopause, did not have any cardiovascular benefits from taking hormone therapy. And in fact, the combination of estrogen plus progestin was associated with an increased risk of heart disease..

Narrator

Those findings caused such concern; the government agency responsible for the study stopped the part of the clinical trial looking at estrogen plus progestin for preventing heart disease. It was a decision that rocked women's healthcare, causing many women, including Maria, to stop taking their estrogen plus progestin forms of hormone therapy. While researchers say hormone therapy doesn't appear to protect women against heart disease, it may help alleviate disruptive menopausal symptoms.

JoAnn E. Manson, MD, DrPH
Brigham and Women's Hospital, MA

"There's no one size fits all approach to hormone therapy right now. We know a lot more about the balance of benefits and risks and I think in many ways, the decision about hormone therapy has been simplified. In most cases, it's very clear whether a woman is a good candidate or not."

Narrator

The best advice is for women to talk with their doctors about whether hormone therapy is right for them, but there is now one absolutely clear statement about hormone therapy.

JoAnn E. Manson, MD, DrPH
Brigham and Women's Hospital, MA

"Hormones should not be taken for the express purpose of preventing heart disease or stroke."

Narrator

Maria took a simpler approach to preventing heart disease. She.s made a few lifestyle changes that are improving her overall health. One of the biggest changes was to add more walking to her daily regimen. She started slowly, just 15 minutes a day at first.

Maria Bueche
Patient

"And then finally maybe within a couple of months, because I did it gradually, I was up to walking an hour."

Narrator

No matter what your age, knowing your risks and taking the active steps to get and stay healthy can make a difference. Coming up next. we.ll show you how to help prevent heart disease in yourself and in your family.

The Patient Channel Presents: Heart Disease: Women at Risk

Narrator

The important idea doctors want women to remember is heart disease is largely preventable.

JoAnn E. Manson, MD, DrPH **Brigham and Women.s Hospital, MA**

"About 80 percent of heart attacks, strokes, and even cases of type two diabetes could be prevented by relatively straightforward lifestyle modifications."

Narrator

Among those lifestyle modifications, one of the most important is one nearly everyone's heard before. Stay away from smoking cigarettes and second hand smoke. Researchers estimate as many as 40,000 people die every year from heart and blood vessel disease caused by someone else's smoke.

Jennifer H. Mieres, MD **North Shore University Hospital, NY**

"Do not smoke. If you started smoking in college, definitely it's the time to quit. Check your cholesterol, check your blood pressure, and adopt a healthy lifestyle and a healthy diet."

Narrator

The recent addition of walking has lowered Maria Bueche's blood pressure, helped her maintain her healthy weight and improved her overall health and well-being. And she can help the rest of her family, too.

Richard A. Stein, MD **Beth Israel Hospital, NY**

"Women have the dramatic ability to affect the next generation's risk factors: how their children eat, whether their children smoke, how their children approach seeing a physician."

Narrator

Connie Burt has made changes to her diet and exercise regimen. She includes more fruits and vegetables and gets more exercise than she used to.

JoAnn E. Manson, MD, DrPH **Brigham and Women.s Hospital, MA**

"The physical activity, for instance is as close to a magic bullet for good health as we've come in modern medicine. Despite all the technological advances, we know that even 30 minutes per day of moderate to vigorous exercise, and including brisk walking, can lower the risk of heart disease, stroke, type 2 diabetes and osteoporosis by about 40 to 50%."

Narrator

Patients may find they need to add medication, such as aspirin, or anticoagulants if they're at higher risk for heart disease, to compliment their efforts and improve heart health. There are a number of effective medicines to help reduce blood pressure, manage diabetes and lower cholesterol.

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As a reminder, knowing some basic information about yourself can be one of the best ways to keep track of your own health. That means: keeping your blood pressure within normal limits: less than 120 over 80 is optimal for the average person. Fasting blood sugar for normal individuals should be below 100. Total cholesterol should be less than 200, with LDL cholesterol less than 130, and HDL cholesterol greater than 50 for women and 40 for men.

Doctors can help patients determine whether they need to adjust their ranges. A diet rich in fruits, vegetables and whole grains, while limiting fat and salt can go a long way in achieving and maintaining heart health.

JoAnn E. Manson, MD, DrPH
Brigham and Women.s Hospital, MA

"We also recommend at least two servings of fish per week. Because fish is associated with a lower risk of heart disease and sudden death related to irregular heart rhythms. It's probably due to the effect of the type of fat in the fish, the omega-3 fatty acids."

Narrator

Patients should also factor in the pressures of everyday life when considering what to do to improve heart health.

Jennifer H. Mieres, MD
North Shore University Hospital, NY

"Stress is a powerful risk factor and we're learning more about it. Finding ways to reduce stress, even sitting at your desk, you know, breathing exercises, yoga, tai chi, whatever it is, are simple lifestyle changes that can make a difference."

Narrator

Of course, it's best to consult with a physician before beginning any major changes in diet and exercise. It's also important to remember:

Richard A. Stein, MD
Beth Israel Hospital, NY

"No one puts on your tombstone 'he didn't embarrass anybody' or 'she didn't embarrass anybody'. So I think you need to become assertive. I think you need to understand that this is a small risk of a terrible thing. But you need to basically be in a place where it can be diagnosed and it can be treated."

Natural Sound:

Jennifer H. Mieres, MD: .Most likely has a very, very tight blockage..

Narrator

Doctors and scientists are working on ways to help patients live longer, healthier lives. Studies underway are evaluating imaging techniques for diagnosing heart disease early on.

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Richard A. Stein, MD
Beth Israel Hospital, NY

"And that's really the goal. The goal is not living life without any problems, the goal is being able to make sure that none of them become the cause of disability or death. And I think we are right at the edge of being able to do that."

JoAnn Manson, MD, DrPH
Brigham and Women's Hospital, MA

"Heart disease is largely preventable. Our heredity is not our destiny, in terms of our risk of heart disease and many other chronic diseases."

Narrator

Maria Bueche is enjoying her simple lifestyle changes and is working hard to stay as fit, both mentally and physically, as possible.

Maria Bueche
Patient

"I'm hoping to live to be a little old lady, by the way. I'm hoping that I'll be around for another 30 years. But of course I'd like to be healthy."

Narrator

For now, Maria's definitely on the right track.

This program was produced in collaboration with the American Heart Association.

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