

read up & go red!

A Look At Women's Heart Health

The American Heart Association's National Wear Red Day is coming up on February 6. But before you slip on that little red dress, read this. It could help save your life or the life of someone you love.



The alarming facts: Worldwide, cardiovascular disease is the largest single cause of death among women, accounting for one-third of all deaths. In many countries, including the United States, more women than men die every year of cardiovascular disease. In the United States, 34 percent of women are living with cardiovascular disease, and the population at risk is even larger. The good news: Most cardiovascular disease in women is preventable.

We spoke with three Columbia cardiologists about women's cardiovascular health: Dr. Anthony Spaedy and Dr. Trung Tran, both at Missouri Heart Center and Boone Hospital Center; and Dr. Mary Dohrmann at University of Missouri Health Care.

Thanks to these fine physicians, we

learned important facts, dispelled a few myths and discovered some interesting heart-health gender differences.

"In women, the risk of heart disease is underestimated. In the general public, the general focus is on cancer risk," Tran explains.

Spaedy notes, "Heart disease is the No. 1 cause of death in women; it occurs later in life in women compared to compared to men. Each decade incidence goes up." We are still learning about these differences.

Dohrmann says, "Until the '90s, little attention was given to gender differences in how to evaluate women with cardiovascular disease, how to limit their risks and the limitations and complications of treatment."

The signs of a heart attack can differ by gender, too.

"Symptoms are not the same as men, who more often have classic chest pain," Tran says. "Women's symptoms are more subtle."

Dohrmann points out an interesting fact: "The most predominant symptom for women can be unexplained, unusual sense of fatigue for up to month leading up to an incident."

The bottom line: Know your body, listen to what it's telling you and don't delay getting medical attention.

Determining your risk of developing cardiovascular disease

The best way to determine your risk

is to talk with your doctor. The American Heart Association also has some wonderful resources available online at www.americanheart.org. The following questions will give you a good start.

What's your body mass index?

"People with a BMI of 25 or higher are more likely to develop heart disease," Spaedy says. Why? Excess weight, particularly with a waist measurement greater than 35 inches, increases the heart's work; raises blood pressure, blood cholesterol and triglyceride levels; lowers good cholesterol levels; and increases the likelihood of diabetes — all indisputably good reasons to maintain healthy weight and BMI through diet and exercise. You can calculate your BMI on www.americanheart.org.

Do you smoke?

Smoking is a major risk factor. Tran says in his own practice he has seen smoking among women going up. Dohrmann notes that women have not had the same advances in stopping as men. Smoking and the use of birth control pills is a particularly dangerous combination that can lead to an increased risk of thrombosis, says Dohrmann. On a positive note, Spaedy says studies show that cities that have banned smoking in public places have seen a significant drop in heart attacks and other diseases. Kudos to Columbia for taking this heart-healthy step!

Are you on hormone replacement therapy?

American Heart Association guidelines list post-menopause as a risk factor for women. What about the use hormone replacement therapy in this group? Spaedy admits the issue of hormones in women is a little complicated.

"Naturally produced estrogen is protective of the heart," he says. "But HRT as a post-menopausal supplement can actually increase the risk."

Tran concurs, "HRT has no benefit for the heart."

What is your family history?

Spaedy advises women to talk with their doctor to determine their personal risk. Tran suggested beginning at age 40 or even ear-



lier if family health history is a significant risk factor. According to Tran, a family risk factor includes having a first-degree relative (parent or sibling) who had a heart attack under the age of 55 for males or 65 for females.

Talk to your doc

Your doctor can best assess your risks and advise you on preventive measures.

Tran says, "If you are over 40, have lipids checked; earlier if you have a premature family history of heart attacks. There are also new things coming down the road that may help, including tests that identify certain markers in blood."

This communication with your doctor is critical, considering that, as Dohrmann explains, women are less likely to be referred to specialists or to receive certain cardiovascular-related treatments.

To become more heart-health savvy in time for the American Heart month of February, go to GoRedforWomen.org and AmericanHeart.org, where you will find an incredible wealth of information and health tracking tools.

Now go ahead and get ready for National Wear Red day! Have not a thing to wear? Log on to GoRedforWomen.org, where you'll find clothing, jewelry and other items celebrating staying fit, smoke-free and heart-healthy. *

Other occasions for that red dress...

**The Columbia Heart Ball,
February 21**

**And of course...
Valentine's Day, February 14**

The Heart Ball is Columbia's most elegant evening with heart. Each year, members of the Columbia corporate and medical communities come together to celebrate the lifesaving work of the American Heart Association.

The funds generated at the Heart Ball will support American Heart Association-funded cardiovascular disease research to improve the lives of women, children and families in the Columbia community. In the past five years the American Heart Association has allocated over \$21 million for 179 research studies at seven institutions in Missouri.

Tickets: 573-446-3000 (local AHA office).