Welcome to the new Institute for Women's Health Research (IWHR) monthly e-newsletter. In it you will find health information on a topic of the month, timely resources and events, and a health tip that you can start using today. If you want additional information about the monthly topic or other women’s health issues, we invite you to visit the Institute for Women's Health Research Website and the Institute’s blog.

Sincerely,

The Institute Staff

FEBRUARY IS AMERICAN HEART MONTH

What is heart disease?
Coronary Artery Disease (CAD), the most common type of heart disease, is the leading cause of heart attacks. When you have CAD, plaque builds up on the walls of the arteries causing them to become hard and narrow (atherosclerosis). When this happens the heart does not get all the blood it needs. CAD can lead to:

*Angina:* chest pain or discomfort that happens when the heart does not get enough blood.
*Angina is not a heart attack, though some of the symptoms are similar. Having angina means you are more likely at risk for a heart attack.*

*Heart attack:* occurs when a clot mostly or completely blocks blood flow, and the heart does not get the blood it needs for more than 20 minutes.

**Heart failure** occurs when the heart is not able to pump blood through the body as efficiently as it should. This means that your other organs do not get enough blood. It does not mean that the heart stops. Signs of heart failure include:

*Shortness of breath*
*Swelling in feet, ankles, and legs*
*Extreme tiredness*

**Heart arrhythmias** are changes in the beat of the heart. Most people have felt dizzy, faint, out of breath or had chest pains at one time. These changes in heartbeat are harmless for most people. As you get older, you are more likely to have arrhythmias. Don't panic if you have a few flutters or if your heart races once in a while. **If you have flutters and other symptoms such as dizziness or...**
heart races once in a while. If you have flutters and other symptoms such as dizziness or shortness of breath, call 911 right away.

Are symptoms of a heart attack different in women and men?
Both men and women have heart attacks, but more women die from them. This disparity might be due in part to a lack of recognition of the different symptoms typically experienced by women, leading to incorrect diagnosis or underestimated risk of heart attack.[1] In fact, one recent study, published in Circulation, indicated that most women reported 'atypical' symptoms such as those listed below, but only 30% indicated chest discomfort in the month prior to their heart attacks.[2] Although cardiovascular disease is the leading cause of mortality in women, a 2004 survey from the American Heart Association showed that only 13% of women perceive heart disease as the greatest risk to their own health.[3] Treatments can limit heart damage but they must be given as soon as possible after a heart attack starts. Ideally, treatment should start within one hour of the first symptoms. For both men and women, the most common sign of a heart attack is pain or discomfort in the center of the chest that can be mild or strong. It can last more than a few minutes, or it can go away and come back.

The symptoms listed below can occur in both men and women, but we now recognize that some symptoms are more common in one sex vs. the other. Women, especially those with high risk factors, often demonstrate some of these symptoms a month or more before their heart attack.[2]

<table>
<thead>
<tr>
<th>M En vs. W Om en</th>
<th>SYMPTOMS</th>
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<tbody>
<tr>
<td>Reported by both men and women equally</td>
<td>• pain and discomfort in the center of the chest</td>
</tr>
<tr>
<td>Reported more often by men</td>
<td>• right side of the chest discomfort</td>
</tr>
<tr>
<td>Reported more often by women</td>
<td>• shortness of breath</td>
</tr>
<tr>
<td></td>
<td>• pain/discomfort in back, neck, or jaw</td>
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<td></td>
<td>• loss of appetite</td>
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<td></td>
<td>• pressure on the chest</td>
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<tr>
<td></td>
<td>• nausea/vomiting</td>
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<td>• sleep disturbance</td>
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What can I do to prevent heart disease?
Certain risk factors such as age and family history cannot be changed, but other risk factors can be reduced by:

1. Being physically active
2. Not smoking
3. Eating healthy
4. Maintaining a normal weight
5. Knowing your numbers (blood pressure, cholesterol, and triglycerides)

Evidence-based guidelines for clinicians for the prevention of CVD in women was published in 2007 and can be found at [http://circ.ahajournals.org/cgi/content/full/115/11/1481](http://circ.ahajournals.org/cgi/content/full/115/11/1481)

Upcoming Events

February 16, 2010, noon-1 pm
IWHR February Research Forum
Women and Cardiovascular Disease: Is There a Gender Difference

February 24, 2010, 11 am-5 pm
Third Annual Women's Cardiovascular Health Symposium for Health Professionals

February 24, 2010 8 am - 11:30 am.
Healthy Tip:

*Have your blood cholesterol and triglyceride levels tested at least once every 5 years.*

Cholesterol and triglycerides are types of fats found in your blood and other parts of your body. The body needs small amounts of them to make cell walls, tissues, hormones, vitamin D, and bile acid. Too much can cause a problem. The extra amounts can cling to, and clog, your arteries. A blood test can measure your levels of:

- **Low-density lipoprotein (LDL) or "bad" cholesterol** - High levels lead to buildup of cholesterol in arteries. To lower your heart disease risk, your LDL level should be less than 100 mg/dL.
- **High-density lipoprotein (HDL) or "good" cholesterol** - High levels of this type are actually good. HDL cholesterol helps lower the total cholesterol level in your body. To lower your heart disease risk, your HDL levels should be above 60 mg/dL.
- **Total cholesterol** - This is your LDL cholesterol plus HDL cholesterol. To lower your heart disease risk, your total cholesterol should be less than 200 mg/dL.
- **Triglycerides** - Another artery clogger. To lower your heart disease risk, your triglyceride level should be less than 150 mg/dL.

Please join the [Illinois Women's Health Registry](https://www.iwhr.org). To date, nearly 3,700 female Illinois residents are participating.

**Why should you join?**

To gain access to groundbreaking research studies and clinical trials.
To help improve prevention and treatment of certain diseases and health conditions.
To improve women's healthcare by making you more aware of your own health issues.

**References**