

Healthy Living



Heart disease - the number one killer of women

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Heart disease kills significantly more women than breast cancer, which is the most commonly diagnosed cancer in women. While everyone should be vigilant about cancer screening and prevention, women's greatest health risk remains heart disease. Recent statistics** released by The American

Heart Association show that more than 350,000 women died of heart disease, compared to approximately 40,000 women lost to breast cancer. Women at high-risk, compared to high-risk men, continue to be far less likely to get basic medical care that could significantly reduce the chances of heart attacks.

Here are specific gender differences between men and women with regard to heart disease (according to WomenHeart fact sheet**)

* 38 percent of women and

25 percent of men will die within one year of a first-recognized heart attack

* 35 percent of women and 18 percent of men heart attack survivors will have another heart attack within six years

* 46 percent of women and 22 percent of men heart attack survivors will be disabled with heart failure within six years

* Women are almost twice as likely as men to die after bypass surgery

* Women are less likely than men to receive beta-blockers, ACE inhibitors or

even aspirin after a heart attack

* More women than men die of heart disease each year, yet women receive only:

- 33 percent of angioplasties, stents and bypass surgeries

- 28 percent of implantable defibrillators and

- 36 percent of open-heart surgeries

* Women comprise only 25 percent of participants in all heart-related research studies

Women are also less apt to get the proper test for heart

disease. The American Heart Association just released a new consensus statement that the exercise electrocardiogram is not as useful in women as it is in men. The Atlanta Cardiology Group at Lake Oconee, practicing at The Cowles Clinic, performs the most up-to-date tests for women to assess the risk and to treat those who have been diagnosed with heart disease.

A woman is at high risk for heart disease if she has diabetes, high blood pressure, high cholesterol, a strong fam-

ily history of heart disease, is a smoker or overweight. If any of these risk factors are present, a woman should be evaluated for risk stratification. With the appropriate attention to risk factors, and aggressive treatment of known coronary disease, chances of preventing a heart attack, or slowing the progression of existing coronary artery disease, can be significantly improved.

**Heart Disease and Stroke Statistics – 2005 Update