Like clockwork

from Dr. Laura Corio, M.D.

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Matters of the Heart

Many of the half million women each year stricken by a heart attack are caught by surprise because they didn't know that women had heart attacks. In fact, coronary heart disease is the number one killer of women in this country. In honor of National Heart Health Month, here is what all women need to know about heart attacks.

Symptoms

One of the reasons that heart disease is under-diagnosed and under-treated in women is that women's heart attacks tend to unfold differently than men's. Rather than the classic crushing pain in the chest and numbness down the left arm that most people associate with having a heart attack, women often experience upper abdominal pain, pain below the chest, or lower back pain. They may feel nauseated, short of breath or experience unusual fatigue for days or even weeks leading up to an attack. Warning signs can be intermittent and often intensify during physical exertion. Women are more likely to delay seeking treatment than men because they don't connect what they're experiencing to a problem with their heart.

Risk Factors

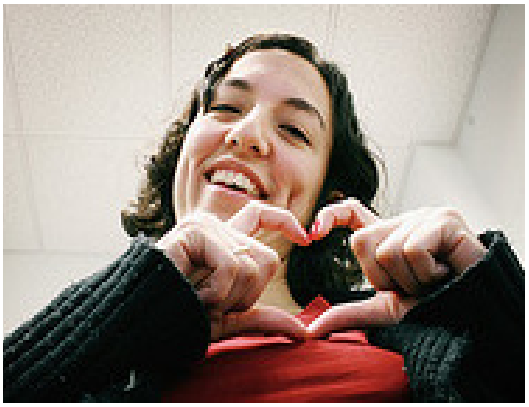
Many of the risk factors for coronary heart disease – a family history of disease, high blood pressure, high cholesterol, smoking, excess weight, a sedentary lifestyle, and diabetes – are the same for women as men. These risks are particularly potent for women because their hearts and arteries are smaller. Women also tend to exhibit more individual risk factors than men. For instance, a greater percentage of females are smokers or diabetics. More women, especially minority women, have high blood pressure. And, there are more overweight female couch potatoes who eat a poor diet than men who lead a similar lifestyle. Oral contraceptives may also increase a woman's risk of heart disease. For example, women over the age of 35 who have high blood pressure or who smoke and take oral contraceptives up their chances of having a heart attack or a stroke. In some women, oral contraceptives may spike cholesterol levels which, in turn, can cause damage to the cardiovascular system.

Risk Categories

In 2004, The American Heart Association released its first ever heart attack risk categories for women. High risk women run a greater than 20 percent chance of having a heart attack in the next ten years; this includes women with diagnosed heart disease, a history of heart troubles or who have type 2 diabetes. Women in the moderate risk category – those with at least one risk factor or a propensity for poor health habits as I've outlined in the section above – have a 10-20 percent chance of suffering a heart attack in the next decade. Low risk women display no risk factors and enjoy good lifestyle habits. Their chances of experiencing a heart attack in the foreseeable future are relatively slim.

After Menopause

Data from the Women's Health Initiative hormone replacement therapy trial, which followed 16,000 healthy post-menopausal women for more than five years, determined that diminished estrogen levels do not appear to be responsible for the sharp increase in heart disease observed after a woman reaches menopause; nor does hormone replacement therapy seem to offer any heart protective benefits. Some experts speculate that perhaps the loss of iron during menstruation could be the reason younger women aren't as susceptible to heart disease as younger men or postmenopausal women. Lower iron levels in the blood may help limit damage to arteries by preventing the formation of artery clogging plaque. Though studies thus far are mixed on this theory, men who give blood (and so, mirror the iron-loss patterns of menstruating women) also have a lower incidence of heart disease. Whatever the reasons, by the time a woman reaches her golden years, all heart-health advantages disappear. Women in their seventies have an equal incidence of heart disease as their male counterparts.



Know the Warning Signs

Rather than chest pain or numbness down the left arm, women often experience upper abdominal pain, pain below the chest, or lower back pain when they are having a heart attack.

Dr. Corio's Resources

For more information about heart attacks and heart health:

- National Heart Association
www.americanheart.org

- The Women's HeartAdvantage national education program
www.womensheartadvantage.org

- Mediterranean Diet Pyramid
www.oldwayspt.org

PEARLS

The Question: I know men are supposed to take an aspirin a day to prevent heart attacks. What about women?

The Research: The American Heart Association guidelines tie aggressiveness of treatment to level of risk. For instance, a daily aspirin is recommended for all high-risk women and for intermediate-risk women who have their blood pressure under control but is discouraged for low-risk women since the potential for side effects can outweigh the benefits. Aspirin is thought to be cardio-protective because it thins the blood and may help lessen inflammation of blood vessels and cardiac tissue. However, it can also cause stomach bleeding, a potential danger to women because they're more likely than men to have a hemorrhagic stroke marked by excessive bleeding rather than blockage.

Dr. Corio Says: We need to determine your risk factors and risk category for heart attack. Don't simply start taking a daily asprin before you have had a check up and we've talked about whether or not that's the right course of treatment for you.

The Question: What is the best diet for prevention of heart disease and heart attack?

The Research: Many medical experts now acknowledge that inflammation can be as big a tip off for impending heart issues as elevated cholesterol. C-reactive protein, or CRP, a blood-borne marker of inflammation is now increasingly recognized as one factor behind clots that block blood flow to the heart. Even in people with normal cholesterol, if CRP is elevated, the risk of heart attack is too. Several large studies, including the 1999 Lyon Diet Heart Study, found that a traditional Mediterranean diet that includes plenty of fruits, whole grains, olive oil, oily fishes and nuts, was best for preventing heart disease by improving cholesterol ratios and reducing inflammation. More recent studies back up these findings.

Dr. Corio Says: Some people think I'm Greek even though I'm not! But I think the Greeks are on the right track with their Mediterranean diet. You can stick with it because it's not the same old boring low fat diet doctors used to recommend. In fact, it's packed with tons of delicious yet heart-healthy fats. It's low in processed ingredients, high in fiber and full of vitamins and minerals. It's also rich in antioxidant which helps prevent the formation of artery-damaging LDL cholesterol.

Sources: American Heart Association, New York Times

Doctor & Office Hours

Doctor's Hours

Monday	*12:00 PM-6:00 PM*
Tuesday	*9:00 AM-3:00 PM*
Wednesday	*9:30 AM-2:30 PM*
Thursday	*8:00 AM-2:00 PM*

Office Hours

Monday	*10:00 AM-5:00 PM*
Tuesday – Friday	*9:00 AM-4:00 PM*

Make an Appointment

Call 646-422-0730 during our normal office hours.

News Flash

New research shows women who have weekly migraines are significantly more likely to have a stroke than those with fewer migraines or no migraine at all, but those with lower migraine frequency may still face increased risk of heart attacks. The Women's Health Study involved 27,798 women health professionals in the United States who were 45 and older. At the start of the study, 65 percent of participants reported migraine less than once a month, 30 percent reported one migraine a month and five percent reported at least weekly migraine. Compared to women without migraine, the study found women who had at least weekly migraines were three times more likely to have a stroke. A migraine frequency of less than monthly raised a woman's chances of having a heart attack by one-and-half times. If you have migraines, we should discuss how these may be effecting your overall health. (Adapted from sciencedaily.com.)