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WOMEN AND HEART DISEASE – WHAT ARE THE RISKS

Heart disease and stroke are the leading causes of death for women throughout the world. More women die from heart disease than from cancer, chronic obstructive pulmonary disease, Alzheimer's disease and accidents combined. More women than men die from stroke every year.



Heart disease seems to happen slightly differently in women than in men. For example, plaque may build up differently in a woman's arteries so that a doctor cannot see a blockage during a cardiac catheterization test. Researchers are trying to understand these differences to help find the best ways to prevent, diagnose, and treat women who have heart disease.

WHAT ARE THE RISKS FOR HEART DISEASE?

Most of the risk factors for heart disease and stroke are the same for women and men. These include smoking, diabetes, high blood pressure, high cholesterol, obesity, lack of exercise and family history.

But women also have other factors that may increase risk.

MENOPAUSE. A woman's risk of heart disease and stroke is higher after menopause. The reason is not completely understood, but cholesterol, high blood pressure and fat around the abdomen—all factors that raise the risk for heart disease and stroke—also increase around this time.

HORMONE THERAPY (HT). If you have menopausal symptoms such as hot flashes and vaginal dryness, you might consider hormone therapy to relieve your symptoms. Because menopause and hormones are linked with the health of your blood vessels, your doctor will discuss your health and risk factors to make sure hormone therapy is safe for you. The risk of heart disease and other health problems varies based on when you start hormone therapy in menopause and how long you take it. Short-term hormone therapy of early in menopause has less risk than when started later. Risk also depends on the type of hormone therapy used, such as estrogen or estrogen plus progestin.

BIRTH CONTROL PILLS. Using birth control pills may increase your risk if you smoke and are older than 35, or if you have a family history of atherosclerosis or blood-clotting disorders. Healthy, young, nonsmoking women probably do not increase their risk of heart disease or stroke when they take low-dose birth control pills.

PREGNANCY-RELATED PROBLEMS. Problems during pregnancy, such as gestational diabetes and pre-eclampsia, have been linked to a higher risk of heart disease and stroke later in life. Experts are studying whether other pregnancy-related problems are linked to heart disease. Tell your doctor about any problems you may have had during pregnancy.

IMMUNE DISEASES. Some immune-related diseases, such as lupus and rheumatoid arthritis, have been linked with a higher risk of heart disease in women.

MIGRAINE HEADACHES. Migraine headaches, especially migraines with aura, have been linked with stroke in women younger than 55.

To lower your chances of getting heart disease, it's important to:

- Know your blood pressure. Having uncontrolled blood pressure can lead to heart disease. High blood pressure has no symptoms, so it's important to have your blood pressure checked regularly.
- Talk to your doctor or health care team about whether you should be tested for diabetes. Having uncontrolled diabetes raises your risk of heart disease.
- Quit smoking. If you don't smoke, don't start. If you do smoke, learn ways to quit.
- Discuss checking your blood cholesterol and triglycerides with your doctor.
- Make healthy food choices. Being overweight or obese raises your risk of heart disease.
- Limit alcohol consumption to one drink a day.
- Manage stress levels by finding healthy ways to cope and outlets for relief.
- Get your annual physical. Knowing your risk can help you and your doctor talk about whether you need to lower your risk. Together, you can decide what treatment is best for you.

Source: <https://www.cdc.gov/heartdisease/women.htm>

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