

Preventing Heart Disease: For Women Only

Are women at risk for heart disease? I thought only men had heart attacks.

Women are at risk for heart disease, just like men. It is a myth that only men have heart attacks. Heart disease is the leading cause of death among women who have gone through menopause. Heart disease kills more women than all cancers combined. Part of the confusion arises because women develop heart problems later in life than men – typically seven or eight years later. However, by about age 65, a woman's risk is almost the same as a man's.

What else do I need to know?

Women are less likely to survive heart attacks than men. We don't know why this is. It may be that women don't seek or receive treatment as soon as men. Or it may be because women's smaller hearts and blood vessels are more easily damaged. Doctors are working on finding answers to these questions. There's no question, however, that it makes sense to prevent heart problems before they start.

What can I do to protect myself?

For men and women, the biggest factors that contribute to heart disease are smoking, high blood pressure, high cholesterol, family history (a close relative with heart disease before age 55), physical inactivity, fat around the waist area, high blood sugar or diabetes, and age. Take a moment to look at your lifestyle, family history and your general health. With this information, you and your family doctor can assess your risk and make a plan to tackle potential problems. Although you can't do much about your family history or your age, you can change many of the other risk factors.

Quit smoking. Smoking more than doubles the risk of heart attack for both men and women. And women who smoke and use birth control pills increase their risk even more. Even breathing smoke from someone else's cigarettes is bad for your heart and lungs. Your doctor can help you quit and stay tobacco-free. (If you live with someone who smokes, encourage him or her to quit.)

Control your blood pressure. Many of the suggestions below (lose weight, follow the DASH eating plan, exercise) also help control high blood pressure. Reducing your salt and alcohol intake can also help. If these steps aren't enough, your doctor will probably recommend medicine.

Control your cholesterol level. If you don't know your level, ask your doctor if it should be checked. Diet is a key part of lowering high cholesterol levels. Some people need medicines in addition to diet and exercise.

Maintain a healthy weight. Extra weight puts extra strain on your heart and arteries. If you're overweight, talk to your doctor about a safe way to shed the pounds. This is especially true if extra fat is in the abdominal area.

Exercise regularly. Remember, your heart is a muscle. It needs regular exercise to stay in top shape. Aerobic exercise, such as brisk walking, swimming, jogging, or biking, gives your heart the best workout. You should exercise 30 to 60 minutes, four to six times a week or set as a goal, walking 10,000 steps per day. Check with your doctor before starting an exercise program.

Eat a low-fat diet. Follow either the TLC or DASH eating plans. You know by now the benefits of a low-fat diet – keeping fat calories to 30% or less of total calories eating as little saturated fat and trans fatty acids as possible. Get 14 grams of dietary fiber for every 1,000 calories. Use spreads with plant stanol esters. Consider eating soy protein daily, too. Plenty of information is available to help you make healthy choices. Food labels list nutrition information, including fat calories. Many cookbooks have heart-healthy recipes, and some restaurants serve low-fat dishes.

Take care of other health problems. Other health problems, such as diabetes, can contribute to heart disease. Talk to your family doctor for individual advice.

What about aspirin?

Regular use of aspirin lowers the risk of heart attack in men by thinning the blood and lowering the risk of blood clots. Aspirin hasn't been studied as extensively in women. The available evidence suggests that it may have the same protective effect in women. However, aspirin can cause gastrointestinal bleeding and other problems. Talk to your doctor about your risk factors for heart disease and whether you should consider taking aspirin.

What about estrogen?

When it comes to heart disease, women have one advantage over men: the hormone estrogen. Estrogen appears to help protect against heart disease by raising the level of good cholesterol and lowering the level of bad cholesterol. Women's bodies make estrogen. At menopause, however, the amount of estrogen drops – and so does the protection it offers. Until recently many thought one way to regain this protection was to put estrogen back in the body. This is called “estrogen replacement therapy.” Estrogen is no longer recommended for heart disease protection. Estrogen therapy also has other benefits: It eases hot flashes and helps prevent osteoporosis (when the bones become fragile). Estrogen therapy does have risks, however, and you and your doctor must weigh these carefully. Your risk factors and your family history will be important in weighing the risks and benefits of estrogen therapy.