

Heart Disease: Are women now more at risk than men?

Heart disease is not a discriminatory disease, despite a widely held view that it affects men more so than women. The reality, in fact, is that it affects both sexes equally, although it has been seen for much of recent history as a man's disease and not an illness that women in general need to be overly concerned with. This misconception has also been evident in how women and men differ in regards to its symptoms, how the disease first manifests itself, either through a heart attack or a stroke, and subsequent [medical treatment](#) for the condition.

Men and women both share a number of common risk factors for heart disease. These include: obesity, smoking, family history, high blood pressure and diabetes. There are also a number of additional risk factors that are either unique or more commonly associated with women; such as increased hypertension and high levels of testosterone during menopause, stress, depression and autoimmune diseases such as arthritis. Women, in particular those in middle age and those who are going through menopause, are urged to eat low fat foods and exercise regularly each week to help reduce the risks of developing heart disease.

Traditionally, women have been led to believe that cancer was their so-called killer disease. Recent studies in the United States have, however, dispelled that myth. Breast cancer, for example, will affect one in eight American women during their lifetime while heart disease or stroke will affect one in two. Also, statistics from 2009 show that breast cancer was directly related to the deaths of 40,467 women in the US, while heart disease accounted for 292,188 women. Moreover, the rate of heart disease in women under the age of 55 is rising year on year, despite overall reductions in the total number of people nationwide dying from the disease.

One of the biggest reasons for this high percentage of women with heart disease is misdiagnosis of their symptoms. Women tend to suffer from atypical symptoms to men. Most men suffering a heart attack will generally

experience searing pain across their chests which can last for a number of minutes before spreading to the neck, arms and legs. Women, on the other hand, typically suffer from what may initially feel like flu-type symptoms: muscle pain or aches, dizziness, shortness of breath and back pain. In some cases, actual chest pain in the area in or near the heart may not occur at all. As a result, some women with heart disease are wrongly diagnosed to suffer from anxiety, gallbladder disease or even indigestion. Incorrect diagnosis, particularly when dealing with such a sensitive area as the heart, can have drastic and long-term consequences.

These differences in symptoms are partly down to contrasts in the physical makeup of men and women. In a nutshell, women's hearts are very different to those of their male counterparts. They are smaller, have smaller and narrower arteries and even have a different rhythmicity to men, which can cause a woman's heart to beat faster. Having smaller arteries is also linked to an increase in the prevalence of microvascular diseases and blockages of blood vessels. Research suggests that a woman's heart may need more time to rest after each beat. Studies have also shown that women who suffer a heart attack are more likely to die than men, while those who undergo heart surgery are also at a higher risk than men of dying during or after the procedure.

Misdiagnosis points to a form of gender bias against women, which highlights a need for re-education of many of the country's medical professionals. A national survey of physicians and doctors has shown that more than 65 percent of those that took part were unaware that men and women displayed different symptoms for heart disease. Almost half of respondents were also unaware that heart disease is the leading health risk for women after menopause, while only 60 per cent had received special training to diagnose heart disease in women. In the [United Kingdom](#), a study has shown that women are less likely to receive the most appropriate pacemaker when compared to men. As the subject starts to receive more attention worldwide, medical facilities and personnel are now being urged to abandon old stereotypes when treating female patients.

When a woman is required to visit a hospital or medical facility for treatment relating to typical female cardiac problems or symptoms, more

often than not they will fail to receive the medication they need or undergo medical procedures designed to relieve pressure on their hearts. While the exact reasons for this are unknown, researchers suggest that initial misdiagnosis of their condition is primarily to blame. As medical teams across the country continue to strive to improve their cardiac services, women are now being urged to take the initiative to ensure they receive appropriate medical care and treatment. This means seeking a second opinion if they feel their doctor or physician cannot find and adequately address the problem, or researching symptoms online to develop a better understanding and awareness of potential medical conditions.

The community in general, but particularly women, need to learn about the risks of contracting heart disease as they age. Most women in their mid-thirties to late forties either don't know or don't understand the potential risk heart disease poses to their lives. Women from age 40 on are seen as most susceptible to heart problems due to the onset of the menopause and other lifestyle factors. Eating healthily and maintaining a regular exercise routine can help [fight heart disease](#), and it is worth highlighting that over 80 per cent of female cases of the disease are entirely preventable.