

# Heart TALK

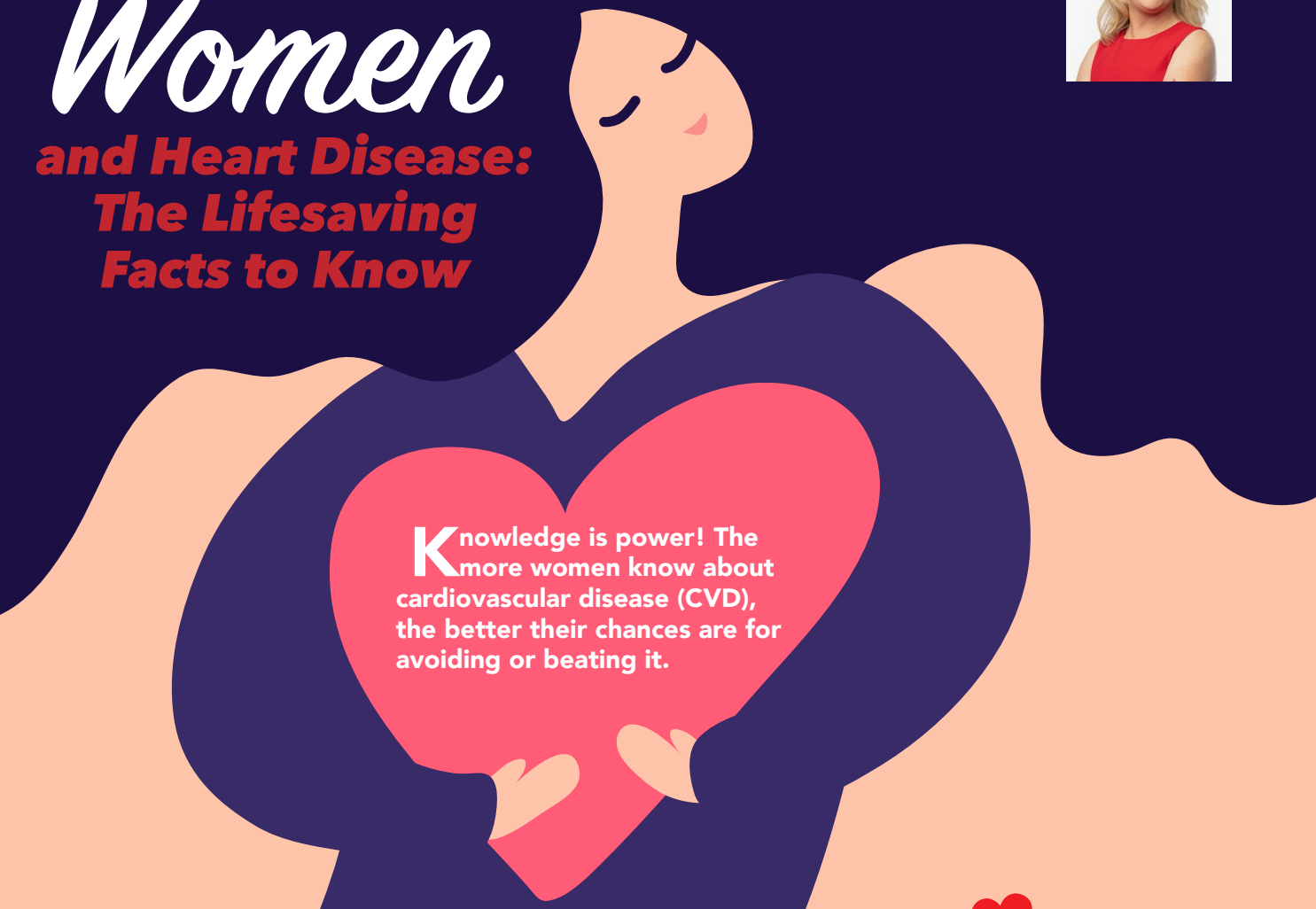
Heart-healthy and Stroke-free Living with Dr. Amy L. Doneen, DNP, ARNP

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*Thoughts from Dr. Amy*



## Women and Heart Disease: The Lifesaving Facts to Know



**K**nowledge is power! The more women know about cardiovascular disease (CVD), the better their chances are for avoiding or beating it.

CVD, which includes heart disease and stroke, now accounts for one out three deaths among women — more than all forms of cancer combined.

Despite proven strategies to detect CVD at the earliest, most easily treatable stages, women with arterial disease often go undiagnosed until they have already suffered a heart attack or stroke. What's more, rates of heart attacks and

strokes are on the rise among younger women.

What's going on — and what do women of all ages need to know to protect themselves from their no. 1 health threat? Here's a look at some key takeaways from the latest research, plus a potentially lifesaving action plan, drawn from Dr. Amy Doneen's 2021 Women's Heart Health Webinar.

**FACT:** 

**Women are being identified as being at high risk after they've already had a heart attack or stroke.**

As discussed more fully in [Dr. Doneen's heart health webinar, available on Vimeo](#), screening methods are now available to detect silent (subclinical) cardiovascular

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disease, before it gets severe enough to trigger a heart attack or stroke. Our advice is, “Be bold — ask for the test.” It’s important — and potentially lifesaving — to advocate for yourself because heart disease in women remains underdiagnosed and undertreated.

**FACT:**  **Rates of heart attacks and strokes are rising among women under age 55.**

Once viewed as mainly occurring in older men, heart attacks are now striking younger people, especially women, according to a [recent study published in Circulation](#). The researchers analyzed data from more than 28,000 people hospitalized for heart attacks between 1995 and 2014 and found that the percentage of younger patients has risen dramatically, particularly among women. From the start of the study to the end, the rate of heart attacks soared from 21 percent to 31 percent in women ages 35 to 53.

The study also found that after a heart attack, young women were less likely than their male counterparts to be treated according to current medical guidelines with such therapies as cholesterol-lowering statins, beta blockers and other heart medications. Other research has shown that women have a higher rate of repeat cardiovascular events than men, highlighting the dangers of such medical bias in treatment.

**FACT:**  **Women have different heart attack symptoms than men do.**

A recent study of younger heart attack survivors (average age 47) found that women had a higher number of non-chest symptoms than men, including nausea, stomach pain, esophageal pressure and burning, shortness of breath and anxiety. The researcher also reported that 30 percent of women and 22 percent of men had sought care

for similar symptoms before the heart attack — but of those who did, 53 percent of the women reported that their healthcare provider did not think their symptoms were heart-related.

The key takeaway for women is that if you feel different than ever before, consider that it might be your heart. Studies have shown that women can develop early warning symptoms days, weeks or even months before a heart attack, and that medical providers often fail to take those symptoms seriously, including unusual fatigue, sleep disturbances, and unexplained anxiety or a sense of impending doom. Consult your medical provider if you have any of these issues and ask to be checked for heart problems.

At the time of a heart attack, common symptoms in women include shortness of breath, abdominal pain and heavy sweating. Having any of these symptoms warrants an immediate call to 911 and emergency care. In the ER, tell the staff that you think you are having a heart attack and insist on being checked for one. Prompt treatment could save your life!

**FACT:**  **64 percent of women who die suddenly from a heart attack didn’t know they had CVD.**


Tragically, a tremendous amount of medical bias still exists — and this must change! Women remain underdiagnosed and undertreated for the disease that is most likely to kill them. We recommend a 3-step action plan:

1. Look for plaque (disease) in the artery wall before it becomes severe enough to cause a heart attack or stroke, using imaging tests, such as a coronary artery calcium scan (cost \$50 to \$200) or [carotid intima media thickness, a painless, FDA-approved ultrasound test that only takes 15 minutes \(\\$100-\\$300\)](#).

2. Find out if your arteries are inflamed. As [we recently reported](#),

chronic inflammation, which we call “fire,” is both a cause of heart attacks and strokes and an important treatment target to prevent them. Think of plaque as kindling. Chronic inflammation, which we call “fire,” is what lights the match. This can cause plaque inside the artery wall to rupture explosively, potentially leading to a heart attack or stroke. We use inexpensive blood and urine tests to check levels of such inflammatory biomarkers as high-sensitivity C-reactive protein (hs-CRP), microalbumin/creatinine urine ratio (MACR) and lipoprotein-associated phospholipase A-2 (Lp-PLA2).

3. Get checked for root causes of arterial disease. Cholesterol is important, but it is NOT the only root cause of CVD. More than 50 percent of people who have a heart attack have normal cholesterol levels. That’s why it’s important to look beyond cholesterol to improve the outcomes for women with heart disease.

**FACT:**  **Insulin resistance is the root cause of 70 percent of heart attacks and many strokes.**

One of the most common — and often undiagnosed — root causes of heart attacks and strokes is pre-diabetes, which affects [70 percent of people with heart disease](#) and 50 percent of those who have suffered a stroke. About 88 million U.S. adults have this disorder, which is marked by blood sugar levels that are higher than normal but not high enough to qualify as full-blown type 2 diabetes. Pre-diabetes starts with insulin resistance (IR), a condition in which cells become insensitive to insulin, a hormone that normally helps the body process glucose for energy.

Of those with prediabetes, 84 percent are undiagnosed, putting them at increased risk for developing heart disease, stroke, and type 2 diabetes — resulting in the same high risk for a

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This easy but elegant one-skillet recipe abounds in zesty Mediterranean flavors and heart-healthy nutrients. Halibut is rich in a wide range of micronutrients, including selenium, niacin, magnesium, phosphorus and vitamins B6 and 12, all of which help support brain, heart and blood vessel wellness. Oily fish, including halibut, are also an excellent source of omega-3 fatty acids, which help reduce blood pressure, triglycerides and risk for heart attack and stroke. If halibut isn't available, use any mild-flavored white fish, such as pollock, cod, grouper, mahi mahi or haddock. The lemon-caper pan sauce is also delicious with chicken fillets or vegan fishless fillets. For a non-dairy sauce, replace the butter with vegan margarine, vegan ghee or another butter substitute, such as Earth Balance buttery spread.



## PREPARATION

Pat halibut fillets dry and season both sides with freshly ground pepper. Heat olive oil and two tablespoons of butter in a large nonstick skillet over medium-high heat until the butter starts to brown. Add halibut fillets to hot skillet and cook for 4-5 minutes, then turn and cook for 3-5 minutes more. Remove the halibut to a plate and add lemon slices to the skillet. Sear briefly on both sides, then remove lemon slices to the plate with the halibut. Reduce heat to medium and sauté shallots and garlic, if using, for one minute. Add capers, lemon juice and lemon zest, then cook for one additional minute. Turn off heat and add remaining tablespoon of butter to complete the pan sauce. Return halibut, lemon slices and any juices that are on the plate to the skillet and warm for one minute. Transfer fish and lemon slices to a serving platter and top with pan sauce. Garnish with chopped parsley — and enjoy! Serves four. Adapted from [theartoffoodandwine.com](http://theartoffoodandwine.com) and [epicurious.com](http://epicurious.com).

## INGREDIENTS

- 1½ pounds of halibut fillets, skin removed and cut into eight pieces
- Freshly ground pepper
- 1 tablespoon olive oil
- 3 tablespoons unsalted butter, divided
- 1 small lemon, sliced
- 2 tablespoons of finely chopped shallots
- 1 teaspoon garlic, minced or crushed (optional)
- ¼ cup of capers, drained
- 3 tablespoons of fresh lemon juice
- 1 teaspoon of lemon zest, finely grated
- 2 tablespoons chopped flat-leaf parsley

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heart attack as that of non-diabetic people the same age who have already had one! The good news, however, is that if pre-diabetes is caught early, it can often be reversed through such lifestyle changes as weight loss, an improved diet, and getting more exercise. That's right, type 2 diabetes is preventable — even if you already have prediabetes!

Other common root causes of heart disease include vitamin D deficiency, high blood pressure (a reading of 120/80 or higher), autoimmune diseases, nicotine exposure and [periodontal \(gum\) disease](#). A [landmark BaleDoneen study](#) recently identified this chronic oral infection, which affects the majority of Americans over age 30, as a contributing

cause of CVD. For an early four-step plan to optimize your oral health, [click here](#).

To learn more about female-specific root causes — and some common red flags that signal increased risk for developing heart disease in women — [watch Dr. Doneen's women's heart health webinar](#) and share what you've learned with the women you love. As Dr. Doneen reports, "We must prioritize our heart health and we realize that we can change the current statistics of heart disease and stroke for women! We must advocate for our daughters, nieces, granddaughters, sisters, mothers and grandmothers."