

# Take it to heart

## WHAT EVERY WOMAN NEEDS TO KNOW TO PROTECT HERSELF AGAINST HEART DISEASE

When it comes to women and heart disease, we've made tremendous strides: More women know that it's a top health threat (57 percent in 2006, up from 34 percent in 2000), but the message doesn't always translate into action. Surveys have found that only 21 percent of women think they might be at risk, which partly explains why more of us aren't adopting heart-healthy habits.

But experts agree — and research shows — that heart disease is largely preventable if you lead a healthy lifestyle. In fact, a new study from the Karolinska Institute in Stockholm found that women who eat a balanced diet, drink a moderate amount of alcohol, stay physically active, maintain a healthy weight and don't smoke can reduce their risk of having a heart attack by 77 percent.

"We're learning that lifestyle has more of an impact on our hearts than we ever thought," says Dr. Lori Mosca, director of preventive cardiology at New York Presbyterian Hospital.

Armed with this guide, get ready to lower your risk of heart disease, starting today.

— *Womans Day and womansday.com*

### OVERLOOKED RISK FACTORS

We all know the usual suspects (high cholesterol, high blood pressure, diabetes) that increase your chances for cardiovascular and heart disease. But experts say that women — and often primary-care physicians — aren't paying as much attention to other risk factors as they should. Plus, emerging research is showing that there may also be a link between heart disease and other conditions, including sleep apnea and depression. If any of these sound familiar, be sure to discuss them with your doctor, as she may want to monitor you more closely for heart disease.

**FAMILY HISTORY:** Yes, it matters — a lot. But recent research reveals that 60 percent of women whose mothers, fathers, sisters, brothers, aunts or uncles have had heart attacks don't think they're at increased risk for having one themselves. And it's not enough just to know whether any relatives had a heart attack or died of heart disease. Mosca says. You also need to find out if anyone has had angina, bypass surgery, angioplasty, an aortic abdominal aneurysm, stroke or peripheral artery disease (PAD), because a family history of these conditions also raises your risk of developing cardiovascular disease.

**BEING OVERWEIGHT:** You don't have to be obese to up your risk. A recent study from the Netherlands suggests that being overweight (having a body mass index between 25 and 29.9) increases your chance of developing heart disease by 32 percent. "People need to be more aggressive about dealing with weight, because it's a risk factor for cardiovascular disease and diabetes, which is directly linked to heart disease," says Dr. Niece Goldberg, medical director of the NYU women's heart program.

**EMOTIONAL WELL-BEING:** "People who are depressed have a two- to five-fold increased risk of cardiovascular disease," says Dr. Sharonne Hayes, director of the women's heart clinic at the Mayo Clinic in Rochester, Minn. The reason for the link is not totally understood, but we do know that people who are depressed have higher levels of inflammation and stress hormones and a greater risk of high blood pressure, arrhythmias and blood clots, Hayes says.

**ORAL HEALTH:** Keeping your teeth and gums healthy (brushing and flossing daily and seeing a dentist regularly) may reduce your risk of some heart infections such as bacterial endocarditis. Plus, recent stats show that women with gum disease have twice the risk of having a heart attack of those who don't.

**CASUAL SMOKING:** "Young women who smoke socially — five to 10 cigarettes a weekend — may not think anything of it, but even this amount can erase the natural protection of estrogen," Hayes says. Even being around a smoker can do damage: One study suggests that women who live with a smoker have up to a 35 percent increased risk of developing cardiovascular disease as they get older.

**OBSTRUCTIVE SLEEP APNEA:** Experts think this condition, which causes loud snoring and brief pauses in breathing during sleep, may contribute to heart disease, and it's hugely under-recognized in women, Hayes says. "People with sleep apnea have higher rates of atrial fibrillation, an abnormal beating rhythm, and heart failure." If you often wake up with a headache, feel tired despite getting six hours plus of shut-eye, or feel really sleepy and lethargic during the day for a few weeks, talk to your doctor about getting screened for OSA.

**PREGNANCY-RELATED HEALTH ISSUES:** If you had preeclampsia (a potentially life-threatening condition that causes high blood pressure), your chances of developing heart disease in your 50s increases twofold, Goldberg says. Having gestational diabetes ups your risk of being diagnosed with type 2 diabetes in the 10 years post-pregnancy, which in turn raises your heart disease risk.

**PERIPHERAL ARTERY DISEASE:** Never heard of it? Neither have 75 percent of people over 50, says a recent large survey, but about 8 million people have it. There's a strong association between PAD, a disease in which the arteries in the legs narrow or get clogged, and heart disease. "The mechanism is the same — the buildup of plaque and clotting causes blockages in the heart, neck, head and legs," Mosca explains. If you have symptoms, including an aching, burning pain in your legs, tell your doctor pronto, especially if you have high blood pressure, high cholesterol or diabetes. (It mostly affects people 50 and over, but anyone can get it.) PAD can be diagnosed with a test called the ankle-brachial index, which compares the blood pressure in your ankle with the blood pressure in your arm.

### TAKE CONTROL, SEE THE PAYOFF

■ Walking briskly for three to five hours a week can cut your risk of heart disease by as much as 35 percent.

■ Lower your cholesterol, and your heart disease risk goes down within six months. If your cholesterol stays healthy, your risk can drop up to 75 percent within two years.

■ Lower your blood pressure, and you'll lower your chances of having a heart attack and stroke by 20 percent to 50 percent.

■ Control your blood sugar if you have diabetes, and you may slash your heart disease risk by 20 percent or more.

### WHAT'S NEW IN TREATMENT

Not much has changed in treating high blood pressure, high cholesterol and diabetes, but there is growing recognition that medications are more effective when combined with lifestyle changes. For heart attack and heart failure patients, there are better stents, pacemakers and defibrillators — and a more aggressive approach to using drugs to lower LDL cholesterol to less than 70 mg/dL, says Dr. Robert O. Bonow, chief of cardiology at Northwestern Memorial Hospital in Chicago. Cardiologists also are changing their views on two key issues:

**1. HORMONE THERAPY:** In recent years, hormone therapy (HT) had fallen out of favor because research found that it didn't protect against heart disease and may increase the risk of stroke. But new evidence suggests that timing may be everything. "If HT is started 10 to 15 years after menopause, it may accelerate heart attacks," Bonow says. "But if women take it around the time of menopause, it may help prevent clogged arteries." Case in point: A study from Harvard Medical School found that women between 50 and 59 who took estrogen therapy were less likely to have plaque in the arteries that lead to the heart.

**2. CARDIAC REHAB:** Cardiologists are increasingly advising heart attack survivors to participate in one of these programs, which offer diet and stress-reduction counseling, exercise programs, physical rehabilitation, depression screening and social support. "If you have a heart attack or heart disease, you have a 20 to 30 percent lower risk of dying from it if you go to a cardiac rehabilitation program," Hayes says. Additionally, a recent study at New York Hospital Queens found that depressed heart disease patients who entered a cardiac rehab program felt significantly better without using antidepressants.

### IN THE NEWS

**YOGA AS MEDICINE:** Practicing yoga regularly can reduce systolic and diastolic blood pressure by an average of 19 mm Hg and 13 mm Hg, respectively, shows a recent review of 12 randomized trials. This is comparable to what happens when you take medication. In another study, people with chronic heart failure who did yoga for eight weeks reported that they could exercise for longer and had an overall improved quality of life.

**POWER DRINKS SPIKE MORE THAN YOUR ENERGY:** Having two energy drinks daily can increase blood pressure and heart rate levels. While this probably isn't dangerous in healthy adults, it could be risky for people who have heart disease or high blood pressure.

**GET OFF TO A HEALTHY HEART START:** Eating whole-grain cereals at least seven times a week is associated with a 28 percent lower risk of heart failure, says a recent report from the Physicians' Health Study. Can't do it every day? No worries. Even those who ate whole-grain cereal two to six times a week had a 22 percent lower risk of heart failure.

**BLACK WOMEN AND LATINAS: TAKE CARE OF YOUR HEART!** Although statistics show that black women and Latinas have a very high risk of developing heart disease — Latinas have a 30 percent chance of having heart disease and stroke, and black women have a nearly 40 percent chance — they're less likely to be aware of their risk factors, including high blood pressure, obesity, diabetes and inactivity. "These are the forgotten women," says Dr. Jennifer Mieres, co-author of the new book "Heart Smart for Black Women and Latinas." She hopes that it will promote heart disease awareness in these communities and make healthy changes seem more doable. "We're trying to translate knowledge into action."

### DON'T FORGET ABOUT ...

... these obvious risk factors, which experts say aren't being monitored closely enough. Healthy numbers look like this:

■ Total cholesterol less than 200 milligrams per deciliter (mg/dL).

■ LDL, or "bad," cholesterol less than 100 mg/dL; less than 70 mg/dL if you've already had a heart attack or have vascular disease.

■ HDL, or "good," cholesterol greater than 60 mg/dL.

■ Triglycerides (another form of fat in the blood) less than 150 mg/dL.

■ Blood pressure less than 120/80 mm Hg. High blood pressure (aka hypertension) is defined as 140/90 mm Hg or higher.

■ Fasting blood sugar less than 100 mg/dL. If it's 126 mg/dL or higher, you have diabetes.

If your numbers don't fall within this range, make a specific plan with your doctor about how to get them where they should be — even if they're only slightly elevated. And don't drop the ball: Ask your doctor when she would like to see you again. At that checkup, she should ask how you're doing and help strategize how to keep your numbers in the healthy range.