8 Myths and Facts about Women’s Heart Health

Do you know the leading cause of death among women?

You may be surprised to find that it’s not cancer — it’s heart disease.

This is just one of many popular misconceptions about women’s heart health. Unfortunately, many women (and men) don’t know important facts about the prevalence, severity and treatment of women’s heart disease, and some of these misconceptions can be dangerous or even deadly. The more you know about how your heart works, the better you’ll be able to keep it healthy — and to recognize the signs when it’s not.

To help get you started, the female cardiologists at Scripps Women’s Heart Center have put together eight common myths and facts about women’s heart care. Scripps Women’s Heart Center provides heart care for women, by women. We’re dedicated to empowering women to take care of their hearts through education, lifestyle and, when needed, expert medical care.

Contact Us
Scripps Women’s Heart Center

For a referral to a Scripps Women’s Heart Center cardiologist, call 858-346-7616, or visit Scripps.org/HeartFacts for more information.
**MYTH:** Cancer is the leading cause of death among women in the U.S.
**FACT:** Heart disease kills more women in the U.S. than any other cause.

Cardiovascular disease takes the life of 161,698 women every year; by comparison, 40,861 women die from breast cancer annually. Yet many women worry less about heart disease than cancer — even though nearly twice as many women die from heart disease than all forms of cancer combined.

**MYTH:** Only men have to worry about heart disease.
**FACT:** Heart disease is a major concern for women — especially younger women.

While is it true that more men than women die from heart disease, the death rate among men has steadily declined during the past 25 years. Unfortunately, the same is not true for women. Among women younger than age 55, heart disease death rates show no signs of decline. Moreover, women age 45 and younger are more likely than men to die within a year of their first heart attack.

**MYTH:** If you don’t have a family history of heart disease, you don’t have to worry about it.
**FACT:** Many women without a family history have heart problems.

A family history of heart disease does increase risk, but so do many other factors: high blood pressure, high cholesterol, diabetes, kidney disease, high sodium intake, smoking, being overweight or obese, and physical inactivity. In addition, certain conditions that only or primarily affect women also appear to influence heart disease risk, including gestational diabetes, pre-eclampsia, early-onset menopause, migraines with aura, and autoimmune diseases such as lupus and rheumatoid arthritis.

**MYTH:** Heart disease affects women and men the same way.
**FACT:** Gender differences do affect heart disease.

One factor may be heart size and strength. Women have smaller hearts and faster heart rates than men. The right ventricle of the heart, which is responsible for pumping blood to the lungs to collect oxygen, is smaller in women and may be more vulnerable to damage. Hormones, especially estrogen, may play a role in protecting women from heart disease, which suggests that a woman’s risk for heart disease increases after menopause.
MYTH: Women have the same heart attack symptoms as men.
FACT: Both men and women may feel chest pain during a heart attack, but that is where most of the similarities end.

Almost half of all women who have heart attacks had none of the typical symptoms that men have, such as pain down the left arm. What’s more, 64 percent of women who die suddenly of heart disease have no symptoms. Women tend to have subtler symptoms that may begin up to a month before a heart attack and include:

- Fatigue or weakness
- Pain, pressure, or tightness in the center of the chest
- Pain that spreads to the upper body, neck or jaw
- Unusual sweating, nausea or vomiting
- Sudden dizziness
- Shortness of breath
- Problems sleeping

Because many of these symptoms can be associated with common illnesses such as the flu, women are more likely to brush them off or assume the cause is something less serious.

MYTH: Women and men with heart disease get the same medical care.
FACT: Women with heart disease often are not accurately diagnosed, nor do they receive the right care.

Research shows that among heart patients, women were less likely than men to receive medications such as beta blockers, statins and ACE inhibitors, which help prevent further heart problems. Women are also less likely to receive an implantable defibrillator to help control life-threatening irregular heartbeats — or even to be given aspirin — following a diagnosis of heart disease.

MYTH: Clinical research on heart care accounts for differences between men and women.
FACT: Heart care research tends to overlook gender differences.

For the most part, researchers have focused on men’s hearts. Women traditionally have been underrepresented in cardiovascular-related research studies; until 2006, studies that enrolled both women and men had only 34 percent women. Also, cardiovascular clinical trials report gender-specific results only about 25 percent of the time.

MYTH: Heart disease cannot be prevented.
FACT: There are a number of steps you can take to significantly reduce your risk of heart disease.

While there are some risk factors you cannot change, such as a family history of heart problems, there are other significant risks that are within your control. These include your weight, nutrition, activity level, stress management and more. Additionally, by partnering with a physician who understands the unique needs of women’s hearts, you can get the most appropriate medical care should you need it.

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