



CARDIO MATTERS

WHAT YOU DON'T KNOW ABOUT WOMEN'S HEART HEALTH MAY SHOCK YOU

By Julie H. Case

Krista Bates was unloading the dishwasher when she started feeling nauseous. She got clammy and sweaty. Then came the shortness of breath, the tightness in the chest, the pain in her back. Thinking she might be having a panic attack, she went outside and called a neighbor. In fact, the then 41-year-old mother of two—a junior high school principal who was training for her first half marathon and in the best shape of her life—was having a heart attack.

“It was a total surprise,” says Bates. “It came totally out of the blue.”

Fact: One-third of women will die of heart disease. Almost five times as many of us will die from heart disease as from breast cancer. The increased mortality rate for women may be in part due to the fact that symptoms for women are different than for men.

“A lot of women expect to have the classic symptoms,” says Susie Woo, MD, a cardiologist at the Heart Institute at Virginia Mason Medical Center. “Even though they might worry about heart disease, they may not realize the shortness of breath might be their heart. They don’t have the threshold for worrying about atypical symptoms when they occur.”

“We always worry about chest pain or shortness of

breath, especially with exertion, but we've all seen cases of women who have presented late because they think other symptoms are not the heart," says cardiologist Liz Chan, MD, "whether that be shoulder pain that's not related to injury or heartburn they just treat thinking it's heartburn or pain between the shoulder blades. Some women have atypical symptoms and don't present until later, and that's unfortunate because some of these patients have had a significant heart attack."

The later you're seen, the more damage is done and the worse the outcome—which may be why women have a greater one-year mortality rate after a heart attack.

Besides not recognizing a heart attack when it happens, why are women still dying of heart disease at such a high rate? It is due in large part to risk factors. According to the doctors, at least 90 percent of women have at least one—high blood pressure, high cholesterol, a sedentary or inactive lifestyle, poor diet, or diabetes.

According to Virginia Mason cardiologist Sarah Weiss, MD, these risk factors don't affect men and women equally. While diabetes increases a man's risk of developing heart disease two-fold, it increases a woman's risk of heart disease fourfold. Hypertension, obesity, and a sedentary lifestyle also increase a woman's risks of heart disease more than those same risk factors do in men. And a man who smokes a pack of cigarettes a day increases his risk of developing heart disease three-fold; a woman, fivefold.

So, how do women decrease their chances of dying of heart disease? First off, by making life-style changes.

"If you smoke, I'd tell anyone immediately to quit," says Bates, though she was never a smoker.

Just as getting a Pap smear or a mammogram is critical to identifying risks for cancer, the doctors at Virginia Mason's Heart Institute urge women to be screened for heart disease risk factors. It's important for women to have their cholesterol, blood pressure, and blood sugar screened regularly.

And they say fitness matters. Regular exercise and an active lifestyle are recommended for everyone, but in the case of primary prevention it can make a huge difference. The doctors urge women to follow the American Heart Association's guidelines of 150 minutes of cardiovascular exercise every week, eat a diet low in fat and salt and high in fruits, vegetables, and lean meats, and keep blood pressure in check.

Just two years after her heart attack, Bates is still on a cocktail of drugs, but she is also healthy. She completed her first half marathon a few weeks before the one-year anniversary of her heart attack—a major goal for her—and hasn't stopped. Today she runs half marathons and 10Ks, albeit at a slower pace, and is careful with her time, making sure to leave work at the office and get a massage once a month.

"This is something that's killing women, and there's a way to save yourself," she says. ■



7 DAYS OF FUN FOR THE HEART

The American Heart Association recommends 150 minutes of moderate exercise or 75 minutes of vigorous exercise each week for optimal heart health.

Can't stand another 30 minutes on the elliptical? Here are fun ways to get some cardio. (Bonus: See how many calories the average 160-pound person burns.)

CHA CHA CHA

Salsa, swing, tango, tap ... whatever step you choose, a dance class is good for your heart in oh-so-many ways. (327/hr)

a sweaty mess. (290-581/hr)

TAKE A TRIP TO THE MALL

Walking is the best place to start a fitness journey, so make a brisk 30-minute lap before you hit the racks. (255/hr)

HIT THE SLOPES

Snowboarding is excellent cardio, and skiing isn't bad either. Best of all, the harder the terrain, the more your heart works. (250-630/hr)

LACE UP THE SKATES

On the ice or at Green Lake, when skating keep a quick but comfortable pace for 30 minutes. Want a challenge? Interval train by speed skating for 2 of every 5 minutes. (508/hr)

DRIVE THE FAIRWAYS

Between the swinging and the walking, golf—without a cart, please—can provide hours of cardio. (400/hr)

CLIMB THE WALLS

At the gym or on a granite cliff, spend an hour a week rock climbing and you'll build better muscles inside and out. (799/hr)

RIDE A HORSE

Trotting is good; cantering is better. Gallop, and both you and the horse will return to the barn

Know Your Numbers

TOTAL CHOLESTEROL*

<200 Desirable
200-239 Borderline high
240+ High

LDL CHOLESTEROL*

<100 Optimal
100-129 Near/above optimal
130-159 Borderline high
160-189 High
190+ Very high

HDL (GOOD) CHOLESTEROL*

Protects against heart disease, so higher numbers are better.

>60 Desirable
<40 Major risk factor

TRIGLYCERIDES*

<150 Desirable
150-199 Borderline high
200-499 High
500+ Very high

BODY MASS INDEX

Less than 25

BLOOD PRESSURE

120/80 Normal
140/90 High

*Courtesy American Heart Association