

The heart attack myth: Study establishes that women do have same the heart attack symptoms as men

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The gender difference between men and women is a lot smaller than we've been led to believe when it comes to heart attack symptoms, according to a new study presented to the Canadian Cardiovascular Congress 2009, co-hosted by the Heart and Stroke Foundation and the Canadian Cardiovascular Society.

"Both the media and some patient educational materials frequently suggest that women experience symptoms of a heart attack very differently from men," says cardiac nurse Martha Mackay, a Canadian Institutes of Health Research clinical research fellow and doctoral student at the UBC School of Nursing. "These findings suggest that this is simply not the case."

Her team's study of 305 consecutive patients undergoing angioplasty – which briefly causes symptoms similar to a heart attack – found no gender differences in rates of chest discomfort or other 'typical' symptoms such as arm discomfort, shortness of breath, sweating, nausea, indigestion-like symptoms, and clammy skin.

While both women and men may experience typical or non-typical symptoms, the major difference was that female patients were more likely to have both the classic symptoms of heart attack plus throat, jaw, and neck discomfort.



"Clear educational messages need to be crafted to ensure that both women and healthcare professionals realize the classic symptoms are equally common in men and women," says Mackay.

So, given this rich array of symptoms, why have studies shown that female cardiac patients do not experience chest discomfort or other 'typical' symptoms as frequently as men?

Mackay notes that previous studies have had some drawbacks. She also thinks a breakdown in communication may be a factor. "In today's fastpaced hospital emergency departments, doctors must try to gather information about a patient's symptoms quickly and efficiently," she says. "Unfortunately this may sometimes mean they ask about a limited 'menu' of symptoms and some may be missed." She advises female patients to tell their doctor all of their symptoms - not just the ones they are asked about.

She recommends that doctors and nurses avoid 'closed' questions when assessing patients. For example, instead of simply asking "are you having chest pain," a question that leads to a yes or no answer, adding "are you having any other discomfort?" may elicit other symptoms that could help make the diagnosis.

"Where women are concerned, some extra probing could result in a speedier and more complete diagnosis," she says. It is important because treatment of heart attack (for both women and men) must be given within a few hours after symptoms begin in order to be effective, so any delay in making the diagnosis could lead to a poorer response to treatment. This is also especially important since women are 16 per cent more likely than men to die after a heart attack.

Heart and Stroke Foundation spokesperson Dr. Beth Abramson says that while women may describe their pain differently than men, the most



common symptom in women is still chest pain. She says that the challenge is that women are less likely to believe they're having a heart attack and they are more likely to put off seeking treatment.

"Heart disease and stroke are the leading cause of death of women in Canada," says Dr. Abramson. "Being aware of the warning signs and acting on them quickly could save your life – or the life of someone you love – and minimize the damage to your health." She says that women and their family members should talk to their doctors, be aware of any symptoms, and understand that heart attacks can happen to them too.

The warning signals of a <u>heart attack</u> - for women and \underline{men} – are:

- Pain
- Sudden discomfort or pain that does not go away with rest
- Pain that may be in the chest, neck, jaw, shoulder, arms or back
- Pain that may feel like burning, squeezing, heaviness, tightness or pressure
- In <u>women</u>, pain may be more vague
- Chest pain or discomfort that is brought on with exertion and goes away with rest
- Shortness of breath
 - Difficulty breathing



- Nausea
 - indigestion
 - vomiting
- Sweating
 - Cool, clammy skin
- Fear
- Anxiety
- Denial

Source: Heart and Stroke Foundation of Canada

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