

# International Women's Day provides a 'red alert' for women's hearts

March 8 2011

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On International Women's Day (8th March), the European Society of Cardiology (ESC) is calling for action to reduce the gender disparities that are currently resulting in women receiving second rate cardiovascular (CV) care. Studies published online today in the *European Heart Journal* (EHJ), the official journal of the ESC, show a persistent under-utilisation of guideline recommended treatments for heart disease in women compared to men.

"The ESC wants to raise awareness, among both cardiologists and the public, that women still are not receiving equal access to medical treatments and also are not being represented sufficiently in clinical trials," says Marco Stramba Badiale, an ESC spokesman on women's issues from IRCCS Istituto Auxologico Italiano (Milan, Italy). "The problem is that despite female gender being associated with worse CV outcomes there are still major misconceptions among both health professionals and the public that cardiovascular disease (CVD) isn't as serious in women as men."

Data from the World Health Organisation (WHO) show that CVD in Europe accounts for 55% of deaths in women compared to just 43% of deaths in men. While [breast cancer](#) - perhaps the most feared illnesses among women - is responsible for only 3% of female deaths. Moreover, recent data from the National Health and Nutrition Examination Surveys (NHANES) looking at trends in midlife [coronary heart disease](#) risk show over the past two decades the prevalence of [myocardial infarction](#) (MI) has increased in women aged 35 to 54 years, while declining in men of

the same age.

"It's very important that physicians are aware that coronary artery disease (CAD) is a frequent disease among women, that gets more common as they get older," says Thomas Lüscher, editor of the EHJ, who has brought together a special issue exploring CV issues facing women.

The studies published in the themed issue raise particular concerns that women are being prescribed fewer drugs than men. "We were shocked to find that even after infarction - the most dramatic cardiac situation we envisage - there's still a dramatic under-utilisation of drugs in women," says Prof. Thomas F. Lüscher, from University Hospital Zurich (Switzerland). "These issues need to be urgently corrected to ensure that women get equal access to state of the art treatments as men."

In the first EHJ study, published online today, cardiologists from the University of Bologna (Bologna, Italy), and the University of Toronto (Toronto, Ontario, Canada), analysed the medical details of 4471 men and 2087 women who had experienced an acute coronary syndrome (heart attack) between 1999 and 2003. The details (which included 23 clinical variables) were recorded on the Canadian Registry of ACS I and I. Results show that women were less likely to:

- Receive beta-blocker: 75.76 % of women received beta blockers in comparison to 79.24% of men (P

Citation: International Women's Day provides a 'red alert' for women's hearts (2011, March 8) retrieved 10 April 2024 from

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