

Heart Disease: Why Gender Difference Matters



Despite the fact that heart attacks kill more women, research on breast cancer is generally conducted more than on heart disease. The general perception is that breast cancer is the disease that kills most women but while that may be true for younger women, heart disease is the major killer for women overall.

Statistics Norway figures show that 645 women died from breast cancer in 2012 as compared to 1489 women who died from a heart attack. Both in Norway and Europe, more women die from heart disease than men.

Maja-Lisa Løchen, professor of preventive medicine at UiT the Arctic University of Norway and senior consultant at the Department of Cardiology, University Hospital of North Norway has been actively involved in investigating gender differences in heart diseases. She believes that despite significant knowledge of how women and men's hearts and heart diseases differ from each other, diagnosis and treatment methods for women's heart diseases is not as well developed as they are for men.

She also points out that there is a lack of knowledge on the effects of heart medications on men and women since in most research projects, majority of the participants are men.

It is already known that women's hearts are smaller than men's and the blood vessels surrounding the heart are also smaller thus it is more difficult to trace changes in them. Prof Lechen explains that these facts make it difficult to examine women's hearts as compared to men's.

Other differences between men and women include: women are ten years older than men on an average when they suffer from heart attacks. Men's symptoms are more evident while women's symptoms are more diffused and are often confused as exhaustion, age or flu. In addition, women have different symptoms for different types of heart disease.

While men suffer more from cardiac fibrillation as compared to women but it is more severe in women. Women are thus at a higher risk of major disabling cerebral strokes. Stress cardiomyopathy also affects more women than men.

Despite the fact that these gender differences have been known for decades, healthcare practitioners still struggle to determine what happens when women have a heart attack.

"They may not have very strong breast pains; other parts of the body such as their shoulders and their neck might be affected instead. They have difficulties breathing and feel unwell, they might wonder if they have the flu or if they should start working out seriously. They wonder if there is something wrong with their digestion or if they're having a nervous breakdown. It is neither clear to the general practitioner nor the woman herself that she's in a hurry to get to the hospital," says Løchen.

Smoking is considered to be one of the biggest risk factors for women when it comes to heart attack. The risk of heart attack in a fifty year old man is five times as high as for a fifty year old woman but her risk of dying increases if she smokes.

Japanese researchers found a distinctive type of heart attack that occurs among women due to stress hormones. They report that women's hearts are smaller than men's and their heart may be more exposed to sudden or extreme stress. They also estimate that 90 percent of patients with this type of heart attack are women and the event is often a result of a serious shock or loss.

Prof Lechen highlights that there is still a great deal of work that needs to be done with respect to the diagnosis of women's heart diseases. X-ray examination of the blood vessels in the heart muscle, misses as much as twenty per cent of the women who suffer from acute heart attack.

Source: KILDEN - Information Centre for Gender Research in Norway

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