Women: a special case?

Widespread misconceptions persist about heart disease, often thought to be primarily a disease of middle-aged men. In reality, cardiovascular disease affects as many women as men, albeit at an older age. Many women still believe that they are more at risk from cancer than from heart disease.

Risk factors for CVD are similar for men and women, but tobacco use is more dangerous in women. In addition, high blood triglycerides are an important cause of atherosclerosis in young women, but not in young men. The menopause has no direct effect, but hormone replacement therapy increases the risk of CVD.

Heart disease is under-detected in women, particularly younger women. In developed countries, women are less likely to be referred to a heart specialist, to be hospitalised, to be prescribed medicines or receive treatment, or to be referred for exercise testing or echocardiography. Women are more likely to enter the medical system with the diagnosis of a second heart attack.

After a first stroke, women are kept in hospital longer, and remain more disabled than men recovering similar care. More research is needed to improve our understanding of the differences in responses to treatment in men and women.

In the interim, however, adherence to the published guidelines for the prevention and control of heart disease and stroke seems prudent.