

An ECG (heart rate) strip is shown as a background for the top half of the page. The grid is orange and red, and the waveform is black. The text is overlaid on this background.

Could it be a heart attack?

A woman's problem too

It never crossed her mind that she could be having a heart attack. Johann was getting ready for work when she felt a burning pain from her waist up to the middle of her chest.

"It was really painful, but not as painful as I thought a heart attack would be," she says.

The pain was severe enough that Johann had to sit down for over half an hour before it went away. By that time, she was exhausted. She stayed home from work and slept for most of the next two days.

On the third day she returned to work, but, she says, "it was still eating at me that something was wrong."

Six days later Johann went to see her doctor, who sent her to the hospital after tests indicated the cause of her pain was a heart attack.

It may seem surprising that Johann did not realize she was having a heart attack. However, this is a very common response.

"A heart attack did not occur to me because I am a woman, I was only 50, and I was still having my period," Johann says.

While being a woman does lower the risk of heart disease before menopause (the end of menstruation), risk factors like smoking, stress, and a family history of heart disease may counteract this effect.

Johann's story reminds us that heart disease is not just a man's problem. Cardiovascular disease, which includes both heart disease and stroke, takes the lives of more of Canada's mothers, sisters, and daughters than any other

condition. What's more, it is striking more often. Over the past 30 years, the number of deaths it caused in women rose, while dropping in men. In 2004, cardiovascular disease killed more women than men in Canada.

As well, women tend to fare more poorly with heart disease. For instance, 42 per cent of women who have heart attacks die within a year, compared to 24 per cent of men. For this reason, prevention is especially important for women.

What is heart disease?

The term heart disease refers to a number of conditions. The most common is coronary artery disease. It results from fatty build-up in blood vessels, or arteries, that feed the vital heart muscle. A heart attack occurs when one of these arteries is completely blocked.

Partial blockage of an artery in the heart may result in angina, or chest pain. Although angina often goes away with rest, it is a warning. It should be investigated by a doctor. Women are more likely than men to experience angina before a heart attack.

Know your risk

Thankfully, there is a great deal you can do to keep your heart in good working order. First, see your doctor regularly. Ask to be screened for risk factors like high cholesterol. (See sidebar for a list of heart disease risk factors.)

is important to get help immediately. Delays can cost you heart muscle, or worse. As Johann says, "just trust your instincts and go."

Embrace a heart-healthy lifestyle

The good news is that most heart disease risk can be lowered through lifestyle. Managing stress, staying smoke-free, eating nutritious foods, exercising regularly, and maintaining a healthy weight are all key to healthy living.

In 2004, more women than men died of heart disease and stroke in Canada.



Heart attack symptoms

Next, learn to recognize the warning signs of a heart attack. Do not be afraid to call 9-1-1 if you think something may be wrong. Many women do experience pain. However, about half of women feel no severe pain. Instead, a heart attack announces its presence through an upset stomach or shortness of breath. Johann was also sweating heavily and feeling generally unwell. Heart attacks feel different to different people, but some common warning signs are listed in the sidebar on this page.

Women sometimes put off getting checked because heart attack symptoms often seem like something else, such as the flu. Women busy with family or career may also minimize symptoms, hoping they will go away. However, it

Learn to manage stress

Chronic stress can add to other risk factors for heart disease, such as high blood pressure and cholesterol. Symptoms of chronic stress include anger, hostility, and mood swings.

You may not be able to eliminate every source of stress in your life. However, learning to manage stress is the foundation of a healthy lifestyle. Start by identifying sources of stress. Become comfortable separating problems you can solve from those you cannot change.

Take time each day to relax, laugh, or talk with those who love you. Identify supports in your life and draw upon them. Supports can include family, co-workers, spiritual practices, professionals, pets, friends and neighbours. Set priorities for your to-do list. Become comfortable saying no.

Am I having a heart attack?

Both women and men may experience typical or non-typical symptoms such as nausea, sweating, pain in the arm, throat, jaw or pain that is unusual. Symptoms include:

- 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
- chest pain or discomfort that is brought on with exertion and goes away with rest (in women, pain may be more vague)
- shortness of breath
- difficulty breathing
- nausea
- indigestion
- vomiting
- sweating
- cool, clammy skin
- fear
- anxiety
- denial

If you are experiencing any of these signals, especially when persisting or more than one, take action.

Get help!

- CALL 9-1-1 or your local emergency number immediately, or have someone call for you.
- Stop all activity and sit or lie down, in whatever position is most comfortable.
- If you take nitroglycerin, take your normal dosage.
- If you are experiencing chest pain, chew and swallow one adult 325 mg ASA tablet (acetylsalicylic acid, such as Aspirin™) or two 80 mg tablets. Pain medicines like acetaminophen (such as Tylenol™) or ibuprofen (such as Advil™) do not work the same way as ASA and therefore will not help in this emergency situation.
- Rest comfortably and wait for emergency medical services (such as an ambulance) to arrive.

Source: Heart and Stroke Foundation of Canada

Finally, care for yourself with wholesome food and physical activity. Healthy living can help you manage stress as well as keep your heart ticking. Your family doctor can likely refer you to a variety of stress management programs and other resources in your area.

Butt out

Although smoking is becoming less common, 16 per cent of Canadian women still smoke. This amounts to about two million women who could cut their risk of a heart attack related to smoking in half, within a year.

If you are one of these women, seek help today. Quitting is hard. You will be more likely to succeed if you participate in a formal program. If you are not sure where to start, talk to your doctor. You can also call the Tobacco Control Program (1-866-318-1116), or visit Health Canada's Go Smoke Free! website (www.gosmokefree.ca).

star attraction, paired with a palm-sized serving of fish, chicken or lean meat. Vegetarian alternatives like lentils and peanut butter are also good choices.

Enjoy a fist-sized serving of whole grain, such as barley or wild rice. Finish with a piece of fruit and a cup of low-fat milk or yogurt.

Finally, choose healthy fats for cooking or flavouring. Select olive oil, canola oil, or non-hydrogenated margarine over hard margarine or butter. Avoid foods with the words 'partially hydrogenated', as well as those containing 'vegetable oil shortening' and 'vegetable oil margarine' in the list of ingredients. These indicate trans fat, the worst kind of fat for your heart.

Be active most days

While any kind of activity is helpful, aerobic exercises like walking, swimming and biking are most effective for heart health. Aim to do aerobic exercise three to five days a week for 30 to 60

Maintain a healthy weight

If you are overweight, keep in mind that these diet and exercise guidelines are just a start. For many people, weight loss requires 60 to 90 minutes of physical activity per day. The following tips may also help.

- *Set realistic expectations* – If you are overweight, losing just five to 10 per cent of your current weight can give your heart a lift.
- *Keep a journal* – Recording what you eat or when you exercise can be very motivating. Counting calories in your foods is even more effective. You will be surprised at how much you learn by keeping track for just three days.
- *Change your environment* – Find ways to avoid those foods you should eat less often, so you are not tempted. For instance, if you cannot resist chocolate bars when you buy gas, pay at the pump instead.

If all else fails, ask for help. Registered dietitians or programs like Weight Watchers™ can teach you to stay on track with healthier habits. Be sure to choose a program that emphasizes exercise and a balanced diet. Rather than losing 50 pounds on a restrictive diet and gaining it right back, aim to form new habits you can stick to and lose weight more slowly.

Keeping it all in perspective

Five years after her heart attack, Johann is 100 per cent smoke-free, and hits the treadmill three times a week. She has cut the amount of fat in her diet. She was supported in her recovery by a cardiac rehabilitation program and a women's cardiac support group. Johann summarizes what she's learned from her experience.

"Do not think that because you are a woman or you are younger that heart disease is not going to affect you. Take care of the risk factors that you can now. Do not let the heart attack be the wake-up call."

Ask your family doctor about support programs in your community that can help you with this goal.

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Heart disease risk factors

Those within your control

- smoking (and exposure to second-hand smoke)
- high blood cholesterol
- high blood pressure
- diabetes (and pre-diabetes conditions such as metabolic syndrome)
- obesity
- physical inactivity
- excessive stress
- depression
- excessive alcohol consumption (more than two drinks a day or more than nine drinks a week for women, 14 for men)

Those you cannot change

- advancing age (men over 55 and women past menopause)
- ethnicity (First Nations people and those of African or South Asian descent)
- family history of heart disease (mother or sister before age 65, father or brother before age 55)

If you are in one of these groups, you will benefit from paying extra attention to the risk factors within your control.

Healthy eating for your heart made easy

Your eating habits can affect your weight, blood pressure, cholesterol, and blood glucose (sugar) control. To improve your heart health, start by reading food labels. Whenever possible, choose foods low in the trans and saturated fats that clog arteries, and low in sodium. Carbohydrates are fine in moderation. They should come from nutritious foods like whole grains, vegetables, and fruit, instead of sugary treats like ice cream, pop and cookies.

Translating food labels into heart-smart meals means making vegetables the

minutes. This includes a five to ten minute warm-up and cool-down.

You will know you are working hard enough if comfortable speech is just barely possible. If you are too out of breath to say three to five words in a row, you are working too hard. If you can sing a song, you are not working hard enough.

Does this level of exercise seem like a lot? Start small – even a few minutes of activity is much better than none. Breaking activity into smaller blocks, such as three 10-minute walks per day, can make it easier to manage. Always check with your doctor before significantly increasing your activity level.