

Heart TALK

Heart-healthy and Stroke-free Living with Dr. Amy L. Doneen, DNP, ARNP

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Thoughts
from
Dr. Amy

Dr. Amy Doneen,
DNP, ARNP

February marked American Heart Month, dedicated to raising awareness of the disease that claims the lives of more American men and women than all forms of cancer combined. The Heart Attack & Stroke Prevention Center held a Women's Red Dress Day at our office on Monday, February 16 that included painless carotid intima media thickness (cIMT) testing, which is sometimes called "an ultrasound of the neck" and checks for signs of cardiovascular disease (CVD).

To welcome everyone, we gave out roses and red-dress pins, and encouraged guests to buy a copy of our book, *Beat the Heart Attack Gene: The Revolutionary Plan to Prevent Heart Disease, Stroke and Diabetes*, to share with a woman you care about. Later in this newsletter, you'll meet one of our patients, Juli Townsend, a young mom who suffered two heart attacks in the same week in 2011.

Her shocking story highlights an urgent issue with "standard care," particularly for women. According to the [first-ever scientific statement on women's heart attacks by the American Heart Association](#), released in January, "heart disease in women remains undertreated and underdiagnosed," leading to worse outcomes. It's extremely im-

portant for women to be aware of their risk: Nearly two-thirds of women who die suddenly from a heart attack were unaware that they had CVD!

Also alarming is rising mortality among women ages 35 to 44 from heart disease: Rates have been increasing by 1.3 percent a year since 1997. [In a study of young patients](#) who survived a heart attack, nearly all had at least one risk factor and 64 percent had three or more. Yet only 53 percent of these patients thought they were at risk prior to the event and only 49 percent had ever discussed their risks or how to lower them with their medical provider.

The study found that despite having similar or greater levels of CVD risk, women were 11 percent less likely to have been informed of their danger by their medical provider, and were 16 percent less likely to have been counseled about proven ways to modify their risk (such as lifestyle changes) before their heart attack than were male patients of the same age.

"Young women cannot afford to continually be less informed than men about their risk for [cardiovascular] disease," said lead study author Erica Leifheit-Limson, PhD. We agree—and urge women to watch out for the following red flags that can herald heart attack and stroke risk in women:

Migraine headaches with aura. Research shows that women with this disorder have higher rates of both heart disease and strokes.

Taking birth control pills. Four recent studies suggest a link between oral contraception use and plaque in the arteries.

Polycystic Ovarian Disease Syndrome

(PCOS). A study of young women who were tracked for 20 years found increased risk for plaque buildup in the arteries .

Pregnancy complications. Expectant moms who develop pre-eclampsia have double the risk for heart disease and stroke ten to 12 years later. Women with this condition need CVD risk assessment three to six months after delivery. Those with gestational diabetes have a 66 percent higher risk for CVD 12 years later, another study found, indicating a need for more aggressive screening post-pregnancy for diabetes, high cholesterol and high blood pressure, all of which also magnify the threat of CVD.

Miscarriage. A study of more than one million women found that risk for miscarriage, stroke or high blood pressure was doubled in women with a history of a prior stillbirth.

Divorce. Compared to non-divorced women, women with one divorce have a 24 percent higher heart attack risk, while those with two or more divorces have 77 percent higher risk.

Gum disease and other risks. While comprehensive testing at the HASPC will give you the most precise assessment of your CVD risk, there are several other red flags for both men and women, including periodontal disease. [Click here](#) to learn more.

Dr. Amy

If you enjoy this newsletter, please pass it along to a friend or family member who may find it helpful.

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A Patient's Story: "I had Two Heart Attacks in One Week—at Age 37"

Juli Townsend was dressing for work when she was hit with chest pain that shot down her right arm, making her fingers numb. Then 37, the customer service representative from Spokane, Washington collapsed on her bedroom floor, overwhelmed by pain, nausea, and shortness of breath.

After a long wait in the ER, she received an EKG and was told it was normal. A doctor said it couldn't be a heart attack, because the pain was in the "wrong" arm. Instead, Juli was diagnosed with bacterial pneumonia and sent home with antibiotics. That seemed to help, but five days later, similar symptoms struck. This time, the pain was in her back and jaw, accompanied by nausea and pressure in her chest.

Thinking it was another bout of pneumonia, the young mom went to bed early, only to have the pain intensify until she felt like she'd been hit by a truck. She ended up in the same ER, where she sat in the waiting room for two hours in agony, while other patients were treated ahead of her. She received an EKG and an hour later, was told it was normal. "After that, suddenly everyone came running in with frightened looks because my blood test results were back." They revealed that Juli had suffered a heart attack.

In fact, it was her second heart attack. She learned she'd been misdiagnosed during her previous visit to the ER—an all too common scenario: A recent study found that women under age 55 seen in the ER for heart attack symptoms are *seven times* more likely to be misdiagnosed than men the same age. One factor is that women's heart attack symptoms—which can include non-chest pain (including pain in the upper back, *either* arm, the shoulders or the jaw), shortness of breath, unusual fatigue, nausea, and heavy sweating—can be different from men's.

Although Juli made a full recovery, she became chronically anxious. "Every time I felt the slightest twinge, I worried it was another heart attack, because no one could explain why this happened when I ate a healthy diet, don't smoke, and kept fit." She also thought she'd been given the wrong treatment: a high-dose statin. "That didn't make sense to me because I'd been told my cholesterol numbers were 'beautiful.'"

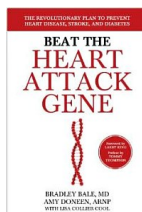
When she turned to the Heart Attack & Stroke Prevention Center for help, our tests revealed that she had a common inherited cholesterol abnormality that the standard lipid test doesn't check. This condition—elevated levels of lipoprotein (a)—triples heart attack risk. The best treatment is niacin (vitamin B3). We also discovered that Juli was prediabetic (high blood sugar is the root cause of about 70% of heart attacks).

"I was so relieved to find out what caused the heart attack—and that it wasn't anything I'd done wrong—that I burst into tears," says Juli, who now has normal blood sugar after treatment with several therapies, including medication, lifestyle changes and cinnamon capsules (which help lower blood sugar and cholesterol). "Instead of worrying every day about when the next heart attack would happen, I feel super-safe. I wish there was a Dr. Amy Doneen and a Heart Attack & Stroke Prevention Center in every city, so everyone could get this wonderful, lifesaving care."

Now 41 and in excellent health, Juli has something new to celebrate. On November 7, 2015, she and her husband welcomed a baby boy, Soren, to their family, which also includes a daughter, Selah, 7. "I'm over the moon with joy," says Juli. "Having Soren seemed even more miraculous than giving birth the first time. I texted Dr. Amy from the delivery room and said, 'Wow, we did it! Thanks so much for getting us here!'"



Juli, Soren and Dr. Amy Doneen.



Highly Recommended: All women should read Chapter 5 in our book, [*Beat the Heart Attack Gene: The Revolutionary Plan to Prevent Heart Disease, Stroke and Diabetes*](#). Chapter 5 is dedicated specifically to women and heart disease and it shares a wealth of information every woman should know.