

Young women often less healthy than young men before heart attacks

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Young women tend to be less healthy and have a poorer quality of life than similar-aged men before suffering a heart attack, according to research presented at the American Heart Association's Quality of Care and Outcomes Research Scientific Sessions 2013.

"Compared with young men, women under 55 years are less likely to have heart attacks. But, when they do occur, women are more likely to have medical problems, poorer physical and mental functioning, more chest pain and a poorer quality of life in the month leading up to their heart attack," said Rachel Dreyer, Ph.D., the study's lead author and a research fellow in [cardiovascular medicine](#) at Yale School of Medicine in New Haven, Conn.

Researchers surveyed 2,990 women and men from an international study of [heart attack patients](#) 18-55 years old. They used general [health measures](#) and a disease-specific questionnaire that assessed patients' chest pain and quality of life prior to their heart attacks. They found:

- Women had a poorer physical and mental health with more physical limitations prior to their heart attacks than similar-aged men with heart attacks.
- The women were also more likely than men to have other conditions associated with heart disease: diabetes (40 percent vs. 27 percent); obesity (55 percent vs. 48 percent); history of stroke (6 percent vs. 3 percent); [heart failure](#) (6 percent vs. 2 percent); [renal failure](#) (13 percent vs. 9 percent); and depression (49 percent vs. 24 percent).

"These data suggest that young women were suffering more from their heart disease than young men prior to their heart attack," Dreyer said. "We need to develop better methods for recognizing

and treating young women with chest pain to optimize their quality of life and potentially even prevent a heart attack. General health and disease-specific health status assessments are valuable tools for healthcare providers to measure the burden of disease on patients. These should be standardized into clinical practice, much like assessments for other traditional heart disease risk factors."

Provided by American Heart Association

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