### Guidelines for Prevention of Cardiovascular Disease in Women

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# Persisting Magnitude of the Problem

- More CVD deaths among women than from cancers, respiratory disease,
   Alzheimer's disease, accidents combined
- CHD death rates in US women 35-54 years increasing
  - Reversing trend of past 4 decades
  - Likely related to obesity epidemic
  - "Leading edge of a brewing storm"
- Black > white women CVD rates
  - Parallels + awareness data



### Your Heart: An Owner's Manual

- Technical specifications parts and features
  - Muscular pump little larger than a clenched fist
  - Weighs less than a pound
  - Beats over 100,000 times daily
    - pumps @ 2000 gallons of blood daily, nearly 5 quarts of blood each minute
  - @ 60,000 miles of arteries, capillaries, veins
  - US warranty
    - av. 81 years white woman
    - av. 76.9 years black woman
    - read Owner's Manual carefully for operating instructions





### Concepts for Owner: Care and Maintenance

- Empowering women awareness, education
  - Favorable lifestyle changes can ↓ CV risk factors, prevent CVD/CHD
- Continuum of risk
  - Match intensity of intervention to risk
- Behavioral changes by women, reshaping practice patterns by healthcare providers
- Partnership between women and their healthcare providers



# Preventive Approaches: Operating and Maintenance Instructions

- Lifestyle interventions MAJOR EMPHASIS
- Major risk factor interventions
- Preventive drug interventions



# Health Benefits of Smoking Cessation

- People who quit smoking before age 50 have 1/2 the risk of dying over the next 15 years compared with continuing smokers
- Smoking cessation improves pulmonary function 20% to 30% within 2 to 3 months
- After 1 year of smoking abstinence, risk of coronary heart disease is reduced by 50%
- Within 5-15 years of smoking cessation, risk of stroke is similar to non-smokers risk



### Walking Cuts Women's Heart Disease Risk

- Nurses Health Study: 72,488 women aged 40-65
- Vigorous exercise and brisk walking reduced the risk of heart attack or death from coronary heart disease by 30-40%
- Women who were sedentary but later engaged in moderate walking reduced the risk of heart attack and coronary death by 20-30%
- Walking at slower pace also beneficial

Manson, N Engl J Med. 341:650, 1999



### The 250:250 Rule

- Exercise an extra 250 calories per day
- Eat 250 fewer calories per day
- Equals 500 fewer calories per day
- 3500 fewer calories per week = 1 lb weight loss

# Lifestyle Changes: They Work!

- Diabetes Prevention Program (DPP)
  - Diet and exercise effectively delayed diabetes in a diverse American population of overweight people with IGT:
    - Physical activity for 30 minutes per day and weight loss of 5-7% of body weight:
      - Reduced risk of getting type 2 diabetes by 58%



# Class III Interventions: Not Useful/Effective and May Be Harmful for CVD Prevention in Women

### **Menopausal hormone therapy**

Hormone therapy and selective estrogen-receptor modulators (SERMs) should not be used for the primary or secondary prevention of CVD (*Class III; Level of Evidence A*).

### **Antioxidant Supplements**

Antioxidant vitamin supplements (eg, vitamin E, C, and beta carotene) should not be used for the primary or secondary prevention of CVD (Class III; Level of Evidence A).



### Owner's Manual: Checkups and Maintenance

#### WHAT TO ASK YOUR PHYSICIAN OR PROVIDER AT YOUR OFFICE VISIT

In additional to traditional cardiovascular risks and your ASCVD risk score, ask about your ASCVD Risk Enhancers:

- 1- Family history of premature atherosclerotic cardiovascular disease
- 2- Persistently elevated cholesterol LDL-C over 190 mg/dL
- 3- Chronic kidney disease
- 4- Metabolic syndrome
- 5- Conditions specific to women: Hypertensive disorders of pregnancy, preeclampsia, premature menopause, gestational diabetes
- 6- Inflammatory diseases, especially rheumatoid arthritis, psoriasis, lupus, and HIV
- 7- Ethnicity such as South Asian, Hispanic/Latino, African American
- 8- Elevated triglycerides over 175 mg/dL
- 9- Elevated hs-CRP over 2.0 mg/L
- 10- Elevated Lp(a) levels over 50 mg/dL or 125 nmol/L
- 11- Ankle-brachial index under 0.9



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