

# Why cardiovascular disease is a treacherous killer of postmenopausal Filipino women

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On several occasions, we've written about wives of our patients who have been dutifully accompanying their husbands to our clinic for checkups, without realizing that they (the wives) are the ones with more serious cardiovascular diseases (CVD).



On their next follow-up, the husbands come to us alone, or with their children. They inform us that their respective wives have succumbed to a fatal heart attack or stroke. No one ever suspected they had a problem!

Not all cases end on a tragic note, though, as some wives, after their husbands' check-ups, would mention before leaving the clinic that they, too, have symptoms like waking up in the middle of the night and feeling short of breath.

The doctor then advises them to have a checkup, too. The problem in the heart and arteries is discovered and treated, avoiding a potentially fatal complication.

There is still a prevailing misconception that only males are predisposed to CVD. The truth is, CVD is the leading cause of death among women in the Philippines and worldwide, killing one in three women. Cancer is a far third, killing one out of nine to 10 women.

Several years ago, a survey was conducted among women in Metro Manila called "Project EVA: Evaluation of the Knowledge, Attitudes and Practices of Filipino Women on Cardiovascular Disease and Risk Factors." Majority of the respondents sought consultations for cancer, and only a minority had screening tests for CVD and its risk factors.

## Awareness campaign

The Philippine Heart Association (PHA), composed of the country's heart specialists, has been spearheading the awareness campaign to make the female population more conscious of this peril, particularly after menopause.

Before menopause, when female reproductive hormones are still present, the heart and cardiovascular system are protected by these hormones, and the effect may linger up to 10 years after menopause.

After that period, the cardiovascular protection is completely lost. It's like a warrior being stripped of his protective shield, making him extremely vulnerable.

Current president Dr. Nannette Rey is one of the most dynamic leaders the PHA has ever had. She is ably backed up by two other lady members of the board of directors, Dr. Aurelia Leus (vice president) and lawyer Darlene Marie Berberabe (external vice president). With the PHA's Council on Women's Cardiovascular Health, they have been going around the country conducting lay forums and guesting on radio and television to disseminate information on how women can protect themselves from CVD.

Recently, Dr. Rey and Dr. Aileen Cynthia Llarena, with the other members of the council, explained on TV simple exercises women can do practically anywhere.

They've also simplified common exercises for women who may no longer be that fit. For example, instead of a jumping jack, they made it a sidejack. Instead of jumping, one steps to the side quickly. Instead of squats, one can do sit-squats—sitting on a chair and standing repeatedly. Instead of a push-up, there's a wall push-up. For the last exercise, instead of kneeling, one gently lunges while straightening the back leg.

Hopefully, with the awareness campaign being conducted by the PHA and our Department of Health, more women aged 55 and older would go for a routine checkup just to find out if they're already at risk for CVD.

There may also be some cultural barriers that have to be addressed, according to Dr. Mila Yamamoto, former chair of the PHA council for women's cardiovascular health. "Filipino women, as part of their culture, would rather put the health concern of their husbands and children before their own, so that by the time CVD is diagnosed, it is already full blown, with attendant complications," says Dr. Yamamoto.

#### Golden opportunity

That's unfortunate, because the golden opportunity to implement primary prevention is lost in many women. "The optimal time to prevent CVD is as early as possible in a woman's life," advises Dr. Yamamoto.

With the other members of the council, they published a manual to provide a guide for health care practitioners (doctors, nurses and health care volunteers) to properly assess a woman's risk for developing CVD and serious complications, even if they're symptom-free.

The manual, which can be accessed through the PHA website ([www.philheart.org](http://www.philheart.org)), helps educate women on healthy lifestyle changes one should adhere to, and advise them when to consult a specialist.

The PHA recommends the Framingham Risk Scoring System, and this takes into account the following factors: age, blood pressure, blood sugar and cholesterol levels. Other important information that can be easily obtained are: weight, body mass index, smoking history, alcohol consumption, family history of heart disease. The PHA website also has a printable copy of the Framingham Scoring Chart to assess cardiovascular risk.

“We believe that awareness and education are the best ways to address the growing incidence of CVD among women,” says Dr. Rey. “We aim to empower Filipinas by making them see the value of taking care of their cardiovascular health, the same way they look out for their loved ones.”

It’s the PHA’s and the council’s vision that all Filipino women are conscious about their cardiovascular health, and realize that heart disease is preventable if they address the risk factors early on.

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