



## Hormones & Heart Health in Women

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When most of us think of cardiovascular disease, we tend to think of older men who haven't given up meat and potatoes. A 2003 American Heart Association study of more than 1,000 women showed a mere 13 percent of women in America realize that heart disease and stroke are their greatest health threat. Cardiovascular disease is the number one killer of women, and the risks are more than COPD, lung cancer, and breast cancer combined. So how do we change these statistics? Through understanding the importance of preventative management, and the unique role of diet and hormones in Heart Disease, women can find drug free interventions to lower their risks.

Cardiovascular disease represents any of a number of specific diseases that affect the heart itself and/or the blood vessel system, especially the arteries of the heart and brain. Known or associated causes of cardiovascular disease include diabetes mellitus, hypertension, hyperhomocysteinemia and hypercholesterolemia. Other forms of cardiovascular disease include ischemic heart disease characterized by reduced blood supply to the heart, congestive heart failure, and inflammatory heart disease.

Many doctors still view women as less susceptible to heart disease and therefore are **less likely to recommend drug or dietary intervention**. Not only does under-

treatment and bad lipid management contribute to heart disease risk in women, but adverse outcomes from surgeries or bypass are higher in women than men.

Metabolic syndrome and diabetes are risk factors for both men and women. However, a woman with diabetes, metabolic syndrome, or a waist circumference greater than 35 inches has a **risk that is doubled** that of men with these same risk factors. Hereditary and dietary influences are the strongest in promoting these diseases.

The Mediterranean diet has been shown to lower both diabetes and cardiovascular disease. It is high in good fats found in fish, nuts, vegetables, and whole grains. Adopting this lifestyle assures healthy cell communication, elimination of toxic hormones, and blood sugar stabilization.

**Hormones may dictate heart disease and stroke risk.** At menopause cardiovascular risk in women equal men and increases significantly until age 65. This has led to a movement to investigate estrogen's role in cardiovascular disease promotion. Estrogen is protective for most of a women's adult life. It has been shown to lower LDL or bad cholesterol, increase the chemical that relaxes blood vessels, thereby lowering blood pressure, and decreases platelet stickiness, decreasing your chances of clotting and atherosclerosis.

Unique risk factors for women are hormone related and include birth control pill use, Hormone Replacement Therapy (HRT), Polycystic Ovarian Syndrome (PCOS), pregnancy, and premature or surgical menopause (i.e. hysterectomy, drug induced or environmental).

The long term use of synthetic hormones or hormone replacement therapy (HRT) imparts

negative effects on the cardiovascular system. HRT involves the use of estrogens (conjugated estrogens from horse urine) and progestin (a synthetic form of progesterone). The Women's Health Initiative was the biggest study done to date on the subject. It was halted due to the increased number of strokes and cardiac related deaths that occurred in women using HRT. Similar studies have been replicated and conclude that **synthetic hormones should not be used in women** without the risks and benefits being carefully weighed.

OCPs or oral contraceptive pills contain a much lower dose of estrogen than HRT. However, they still increase the amount of inflammation, a significant cardiovascular risk factor as well as clotting.

Most studies have not looked at natural hormones such as bio-identical hormone therapy. Bio-identical hormones have a chemical structure that is identical to human hormones. Smaller studies suggest that if bio-identical hormone therapy is started early enough, heart disease may be prevented. Hormone therapy should not be your primary choice for stroke prevention, as the most proven preventative strategies are lifestyle changes.

A baby aspirin (81mg) is often recommended to prevent heart attacks. Aspirin is a very controversial drug therapy with many potential side effects. A recent study shows that this therapy is only effective in women over 65 who have already had a cardiovascular event. You should talk with your doctor before beginning aspirin therapy.

Supplements to consider adding to a Mediterranean diet include Vitamin E, CoQ10 and omega-3 fatty acids found in fish oil. They have established cardio protective

benefits and can even lessen side effects of many cholesterol and cardiovascular drugs. Consult a naturopathic doctor for the best diet and exercise program to lessen your chances of heart disease. In summary, all women over 35 years of age should be asking for lipid and cardiovascular tests, and consulting a naturopathic doctor to start a preventative program to lower risks. The sooner you achieve lipid management with drug free interventions, the longer you can live healthy and happy.

Dr. Preston is a licensed naturopathic doctor specializing in women's health and endocrinology. She utilizes a variety of natural treatments including, medical nutrition, Bio-Identical Hormone Replacement therapy, and herbal medicine to treat the cause of illness and eliminate disease.