Women's Health Disparities:
Cardiovascular Disease

- **1 in 5 women** in the U.S. die from cardiovascular disease each year.[1]
- Women experiencing chest pain wait **11 minutes longer** to get care in the emergency department than men with the same symptoms.[2]
- **57%** of stroke deaths in 2019 were **women**.[3]

Cardiovascular disease (CVD) – which broadly describes disorders that affect the heart and blood vessels – includes ischemic heart (or coronary artery) disease, stroke, heart failure, and arrhythmia. CVD is the leading cause of death among women in the United States and globally.[4]

More than 44% of women (60 million) in the United States are living with some form of heart disease.[5] While common symptoms of cardiovascular disease include pain and pressure in the chest; radiating pain to the neck, shoulder, back, and arm; difficulty breathing; cold sweats; heartburn; and palpitations, women can also display unique and often milder signs and symptoms than men.

CVD Symptoms Unique to Women

- Fatigue
- Feeling of systemic illness (without chest pain)
- Mild discomfort in the back, chest, arm, neck, or jaw (without chest pain)
- Shortness of breath
- Sudden onset of weakness

Many individuals do not have a general understanding of their own personal risk for CVD. Certain risk factors cannot be controlled, such as family history of CVD, age,

race, ethnicity, and hormonal changes (such as puberty or menopause). However, some risk factors can be controlled or changed to promote heart health. An estimated 70% of CVD cases and deaths are attributed to modifiable risk factors.[6]
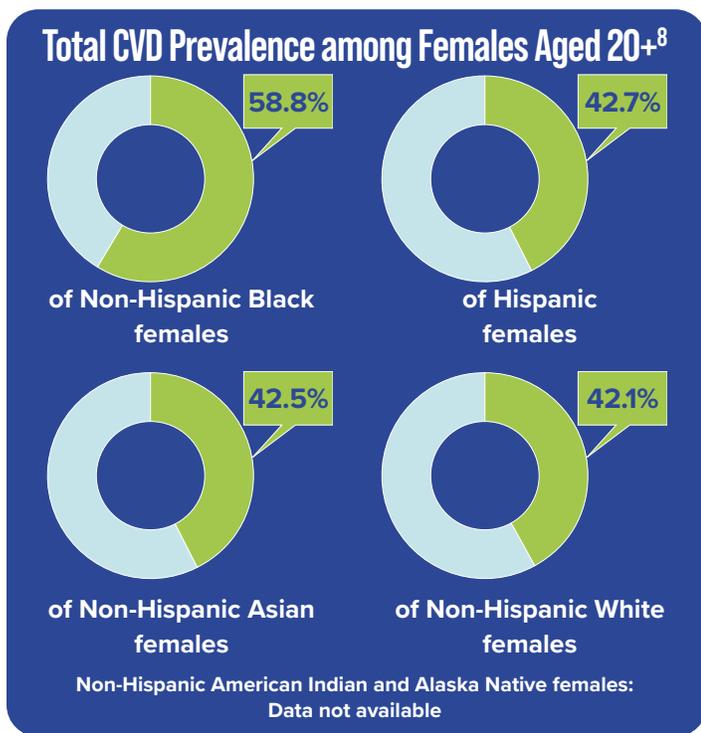
Modifiable Risk Factors

- Alcohol consumption
- Body mass index (BMI ≥25)
- Non-HDL cholesterol (e.g., low-density lipoproteins)
- Sleep hygiene (poor or not enough sleep)
- Smoking and tobacco use
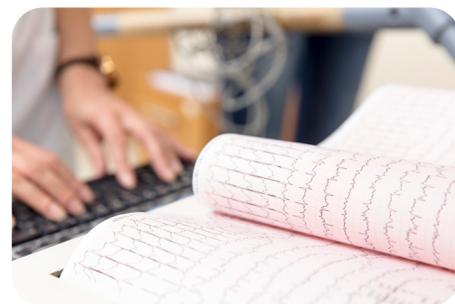- Systolic blood pressure

Populations at Elevated Risk

- **Young Adults (18-49 years):** Younger women who experience heart attacks are more likely to be misdiagnosed compared to their male counterparts.
- **Pregnant Populations:** From 2011-2015, CVD was responsible for more than 1/3 of all pregnancy-related deaths in the United States.[7]
- **Postmenopausal Women:** The decline in estrogen hormone production due to menopause increases the risk for developing CVD as a woman gets older.
- **Women living with chronic health conditions**, such as diabetes, obesity, hypertension, and kidney disease

Prevention is among the most helpful tools available to reduce the burden of heart disease and improve overall well-being. Adopting a heart-healthy lifestyle that includes regular movement and physical activity, a balanced and nutritious diet, and avoiding harmful habits can enhance cardiovascular resilience and reduce the likelihood of developing heart-related complications. However, successfully modifying individual risk and treatments for heart disease must consider accessibility to resources, such as gyms and safe spaces to exercise, healthy food options, and time to dedicate towards cooking and health-promoting behaviors.

Total CVD Prevalence among Females Aged 20+[8]

58.8% of Non-Hispanic Black females

42.7% of Hispanic females

42.5% of Non-Hispanic Asian females

42.1% of Non-Hispanic White females

Non-Hispanic American Indian and Alaska Native females: Data not available

Disparities in Clinical Studies

There are persistent gender disparities in cardiology clinical trial participation. One study revealed that women represented only 38% of cardiovascular trial participants from 2010 to 2017, and only 56% of major cardiovascular trials from 1986 to 2019 reported any racial or ethnic information.[9][10] Factors that hinder participation of women and other diverse populations in clinical studies include fear, mistrust, lack of engagement or invitation to participate, restrictive eligibility criteria, and logistical challenges such as time, finances, and other resource constraints.

Economic Impact[11]

Cardiovascular disease places a substantial economic burden on individuals and society, affecting health care costs, productivity, and overall economic stability. In 2020, CVD accounted for 12% of total health expenditures in the United States. The total direct costs associated with CVD were **$254.3 billion**, including $110.3 billion due to inpatient hospital stays. Moreover, direct and indirect costs for CVD in women were **$160.6 billion**, with more than 26% of the expenditures attributed to mortality.

Women's Health Equity Initiative

The Society for Women's Health Research Women's Health Equity Initiative aims to raise awareness, educate the public and policymakers, and address longstanding disparities in women's health care access and outcomes. The initiative highlights statistics on disease states, life stages, and issues that disproportionately affect women in the United States and engages communities on solutions to improve health equity for women from diverse, races, ethnicities, geographies, ages, and roles throughout society.

▶ **For more resources about Heart Health and women, visit www.swhr.org**

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