



# Maine Cardiovascular Health Council

**A Coordinated Approach to CVD Risk Reduction**

## 7th Governor's Cardiovascular Health Summit

Approximately 133 people attended **Unlocking the Heart of a Woman: Understanding Gender and its Effect on Heart Disease**, the topic for the seventh Maine Governor's Cardiovascular Health Summit held on June 16 at Colby College in Waterville.

The Summit program was designed to examine how women are different including physiology, psychosocial factors, and program implementation. Until recently, heart disease was viewed primarily as a risk for men, partly because men generally develop signs, symptoms and disease earlier than women do. In addition, women often have different signs and symptoms of impending heart attack and these can be overlooked.

Mary McGowan, MD, Director of the Cholesterol Management Center at the New England Heart Institute in Manchester, NH, presented an overview of the magnitude of the problem, gender differences in disease and outcomes, and importance of risk recognition and lifestyle change.

Rebecca Thurston, PhD, a Robert Wood Johnson Health and Society Scholar at the Harvard School of Public Health discussed the social and psychological factors that influence health status in women. Specific social factors include socioeconomic status, education, income, and occupational status. Although these can be related to each other, the literature has demonstrated that socioeconomic status emerges as the most consistent risk factor for cardiovascular disease. Psychological factors include depression and anxiety and the effects on the body as well as behavior that influences health status.

Sari Tudiver, PhD, a senior policy analyst with the Women's Health Bureau at Health Canada, presented an overview of importance of gender-based analysis when developing policy, practice, and programs for addressing women and cardiovascular disease.

The afternoon sessions were small group discussions in three areas: linking employers and clinical care; community partnerships supporting women and heart health; and an up-to-date overview of fats and their relationship to heart disease in women.

During the Summit, the 14th Annual Larry Johnson Memorial Award was presented to Alice Page for her dedication and coordination of a local group, the first of its kind in Maine, that serves as a support network for women with heart disease. Also awarded during the Summit was the MCHC Heart Healthy Recognition Award. This year the award went to Blue Hill Memorial Hospital/Healthy Peninsula SCORE Program and was accepted by Catherine Princell.

Updates on the following topics can be found by going to [www.maineheart.org](http://www.maineheart.org) and clicking on News:

- Policy
- Cholesterol
- Blood Pressure
- Stroke
- American Heart Association
- Medicine
- Diabetes
- Psychosocial Factors
- Other Risk Factors

## AHA Scientific Statement

### Air Pollution is a Serious Cardiovascular Risk

Exposure to air pollution contributes to the development of cardiovascular diseases, according to a new AHA scientific statement published in the June 2004 print issue of *Circulation*.

A recent report from the American Cancer Society study found that long-term exposure to fine particulate air pollution at levels that occur in North America increased the risk for cardiovascular mortality. The risk increased by 12% for every 10-micrograms-per-cubic-meter-of-air elevation in fine particle concentration. The largest portion of this increased mortality rate was accounted for by ischemic heart diseases, however other causes were also increased, such as heart failure and fatal arrhythmias.

Those who lived near a major road were more likely to die of a cardiovascular event. The AHA recommends that people with heart disease or cardiovascular risk factors, diabetes or pulmonary disease limit outdoor activities when pollution is high, per Environmental Protection Agency Air Quality Index recommendations.

## Update on Cholesterol Guidelines

### More-Intensive Treatment Option for Higher Risk Patients

A 2004 update to the National Cholesterol Education Program's (NCEP) clinical practice guidelines on cholesterol management advises physicians to consider new, more intensive treatment options for people at high and moderately high risk for a heart attack. These options include setting lower treatment goals for LDL cholesterol and initiating cholesterol-lowering drug therapy at lower LDL thresholds.

The update published in the July 13, 2004 issue of *Circulation* is endorsed by the National Heart, Lung, and Blood Institute (NHLBI), the American College of Cardiology, and the American Heart Association. The document is based on a review of five major clinical trials of statin therapy conducted since the 2001 release of the NCEP's cholesterol guidelines known as the Adult Treatment Panel (ATP) III Report. NHLBI, a component of the National Institutes of Health, coordinates the NCEP.

For a description of the major recommendations, see [www.maineheart.org/News/CholesterolNews.htm](http://www.maineheart.org/News/CholesterolNews.htm).

MCHC Project Updates (Policy, Women & Heart Health, CATCH, and Worksite) can be found by going to: [www.maineheart.org/CVDHealthProgram/CommitteeUpdates.htm](http://www.maineheart.org/CVDHealthProgram/CommitteeUpdates.htm).

## MCHC Annual Meeting

The Maine Cardiovascular Health Council's Annual Meeting will be held on Thursday, September 9th from 2:00 to 4:00 pm at Medical Care Development. This meeting is open to all MCHC members. If you plan to attend, please RSVP by August 13th by calling 622-7566, ext. 230 or emailing [dianec@mcd.org](mailto:dianec@mcd.org). MCHC Officers will be elected during this meeting.