Women and Cardiovascular Disease: SOUTH CAROLINA

Brenda Jones, South Carolina Survivor

On February 1, 2009, Brenda Jones celebrated her 10-year anniversary as a heart patient survivor.

In 1999, Brenda was diagnosed with ASD, or atrial septal defect – a hole in the wall separating the two upper chambers of the heart. Doctors told Brenda that she had had this defect at birth, but that it had gone undetected for 40 years.

Brenda was shocked—she had always been considered healthy and fit. She ate right, exercised, didn’t smoke, and did all the right things, and here she was, living with a silent killer.

According to the American Heart Association, this isn’t unusual. Some patients with ASD have no symptoms. If the opening in the heart is small, it won’t cause symptoms because the additional work done by the heart and lungs is minimal. On physical examination, the only abnormal finding may be a murmur (noise heard with a stethoscope) and other abnormal heart sounds. However, with progressive damage to the lung vessels, the pressures in the lung may rise, and the patient can become severely limited.

The lesson Brenda learned from her experience is this: “All women need to know the importance of listening to their bodies and having yearly routine check ups. And even with all of this, sometimes some things go undetected. That’s how I was. I sensed a problem, but thought the way that I felt was normal. Women must become more educated about heart disease and what warning signs to look out for.”

“Research into various forms of heart disease has progressed significantly since 1999,” added Brenda. “My condition had to be repaired with open heart surgery. Today, doctors can resolve this problem by way of a percutaneous atrial septal defect closure, which is a minimally invasive procedure that closes the hole in the heart without the patient having to undergo open heart surgery. Patients have an overall faster recovery and can return home on the same day. Hats off to the American Heart Association!”

FACTS

Heart Disease Rates, All Women, Ages 35+, 2000-2006

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<tr>
<th>Age-adjusted Average (Annual) Deaths</th>
<th>South Carolina</th>
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<td>297 - 335</td>
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<td>408 - 477</td>
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State Rate 355
Nation Rate 351

• Heart disease and stroke account for 27.9% of all female deaths in South Carolina.

• On average, about 15 women die from heart disease and stroke in South Carolina each day.

• Heart disease alone is the leading cause of death in South Carolina, accounting for 4,080 female deaths in 2009.

• Stroke is the No. 3 cause of death for females in South Carolina, accounting for 1,432 female deaths in 2009.

• Nearly 63.1% of women in South Carolina are obese and overweight.

• In South Carolina, 17.0% of women smoke cigarettes.

Source: Centers for Disease Control and Prevention. Mortality data based on WISQARS Leading Cause of Death Reports, 2009; state maps from the Division of Heart Disease and Stroke Prevention; risk factor data from the BRFSS, 2010.

* Overweight is defined as having a body mass index (BMI) of 25.0-29.9 kg/m² and obese is defined as having a BMI of 30.0 kg/m² or greater.