

## Cardiovascular Disease: Women's No. 1 Health Threat

### Overview

Cardiovascular disease (CVD) remains the No. 1 cause of death in American women, claiming approximately 446,912 lives in the US in 2022—more than cancer, chronic respiratory disease, and diabetes combined.<sup>1</sup> In contrast to breast cancer, which causes the death of 1 in 43 women, CVD accounts for 1 in every 3 female deaths.<sup>2,3</sup> The statistics are even more dire when examining disparities by race and age. African American women have the highest prevalence of CVD at 59%, compared to 44.6% in white women, 37.3% in Hispanic women, and 38.5% in Asian American women.<sup>4</sup> While earlier decades saw sharp declines in women's CVD mortality, progress reversed in 2020, when the age-adjusted CVD death rate rose from 177.5 per 100,000 to 187.6 in 2021, before modestly improving in 2022.<sup>5</sup>

CVD is largely preventable—up to 90% of cases in women could be prevented through healthy lifestyle choices and addressing modifiable risk factors, such as quitting smoking, regular physical activity, and eating a healthy diet.<sup>6</sup> Despite this, 44% of adult women in the US live with some form of heart disease,<sup>7</sup> and approximately 75% of women age 20-39 have at least one modifiable risk factor, including high blood pressure, high cholesterol, diabetes, smoking or excess weight.<sup>8</sup> Furthermore, awareness among healthcare providers about the unique risks women face remains inconsistent, contributing to underdiagnosis and undertreatment. The American Heart Association (AHA) is committed to bridging these gaps by advancing education, improving risk screening, and advocating for equitable care to empower women to take control of their heart health.

### Raising Awareness

- <sup>7</sup>A 2021 special report from the American Heart Association found that a decreasing proportion of women are aware that heart disease is the leading cause of death for women, with only 44% reporting awareness compared to 65% in 2009.<sup>9</sup>
- African American and Hispanic women are less aware about the risks of heart disease compared to their White counterparts: a 2023 survey found that 66% of African American and 80% of Hispanic women did not know CVD is the leading cause of death.
- Only 53% of women said they would call 9-1-1 if they believed they were having a heart attack.<sup>10</sup>
- <sup>8</sup>Many women lack awareness that heart attack symptoms like nausea, fatigue, and jaw pain are common, leading to missed or delayed recognition of heart attacks.<sup>11</sup>

### Disparities Risk

- Women remain significantly less likely than men to meet both aerobic and muscle-strengthening guidelines—26.9% of women versus 35.2% of men in 2020.<sup>12</sup>
- Female smokers face approximately 25% higher excess risk of coronary artery disease than male smokers.<sup>13</sup>

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- Women with diabetes are 44% more likely to develop CVD than men with diabetes.<sup>14</sup>
- Obesity, which is more prevalent in women, increases lifetime risk of CVD by 85%, and by 150% with severe obesity.<sup>15</sup>
- Depression and anxiety, both risk factors for CVD, are disproportionately experienced by women, with women being twice as likely to be diagnosed with depression than men.<sup>16</sup>
- A 2023 study found that women with at least one gynecological condition, such as endometriosis, polycystic ovary syndrome (PCOS), heavy menstrual bleeding, or menstrual irregularities, faced a 28% higher risk for heart disease or stroke.<sup>17</sup>
- 1 in 4 women will develop atrial fibrillation (AFib), and women with AFib are five times more likely to experience other conditions including stroke, than men with AFib.<sup>18</sup>
- Between 2018 and 2022, cardiovascular disease was the overall leading cause of pregnancy-related deaths in the US, with American Indian and Alaska Native women and Black women having the highest mortality rates.<sup>19</sup>

## Disparities in CVD Research, Treatment, Diagnosis and Mortality

- After a heart attack, women are 32% less likely to be referred to cardiac rehabilitation than men.<sup>20</sup>
- Women face a 20% higher risk of developing heart failure or dying within five years after a severe heart attack compared to men. This disparity is even more pronounced among African-American women.<sup>21</sup>
- Women experience longer ER wait times for heart-related care than men, and women of color wait approximately 15 minutes longer than white women for initial evaluation.<sup>22</sup>
- Women with heart disease are less likely than men to be prescribed cholesterol-lowering statins, with only 67% receiving the recommended medication compared to 78% of men.<sup>23</sup>
- Only 10% of leadership roles in cardiovascular clinical trials are held by women, which correlates with lower female enrollment.<sup>24</sup>
- Women have been underrepresented in clinical trials, generally making up only 40% of people enrolled in heart disease research.<sup>25</sup>
- Women are 1.5 times more likely to report nonadherence to secondary stroke prevention drugs at 90 days compared to men.<sup>26</sup>

## Association Advocates

While the nation has made important strides in reducing cardiovascular disease death and disability overall, achieving similar progress for women demands focused and sustained efforts to close persistent gaps in prevention, diagnosis, treatment, and outcomes. The American Heart Association (AHA) remains committed to advancing heart health equity for all women, especially those from underserved communities, through targeted policies and programs.

- The AHA continues to advocate for efforts that enhance the collection and availability of demographic subgroup data, with an emphasis on improving the inclusiveness of clinical trial data.
- The AHA supports policies aimed at reducing barriers to cardiac rehabilitation for women, including expanding access, affordability, and tailored programming to improve adherence and outcomes.

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- The AHA remains committed to protecting and strengthening the Affordable Care Act, ensuring comprehensive, affordable health coverage that supports women's access to preventive and cardiovascular care.
- AHA supports sustained investment in programs that expand access to CVD screenings and lifestyle counseling for women and families with low-incomes, and those that are uninsured or underinsured women to promote early detection and prevention.
- AHA supports the development of sustainable policies and solutions for preventing maternal death and ensuring all mothers can live healthy lives before, during, and after pregnancy.
- AHA initiatives, including Go Red for Women, encourage awareness of the issue of women and heart disease, and provide education and tools that empower women to manage their heart health and advocate for themselves in clinical settings.

For more information and resources from the American Heart Association's policy research department, please visit [www.heart.org/policyresearch](http://www.heart.org/policyresearch)

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