

*Love Boldly*



*Resilience*



*Live Bravely*



*Courage*

# WOMEN AND CARDIOVASCULAR AWARENESS

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## A GUIDE TO RISKS AND SOLUTIONS

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Empowering Every Woman to Recognize Her Risks and Protect Her Heart

With acknowledgement and thanks to:

# HeartLife FOUNDATION

**HeartLife Foundation** is Canada's first patient-led heart failure not-for-profit organization, dedicated to elevating the voices and experiences of people living with cardiovascular disease. Through initiatives like E3—Educate, Empower, Engage—HeartLife advances awareness, advocacy, and support for patients and caregivers, including focused efforts to improve women's heart health across Canada. Together, we're working to ensure every woman is seen, heard, and supported on her heart journey.



A heartfelt thank-you to the **Canadian Women's Heart Health Alliance** and **Heart & Stroke** for their support and generous knowledge-sharing. Your leadership and unwavering commitment to women's heart health are essential to advancing better care and earlier, more accurate diagnostics for women across Canada



The information shared in this publication is for general awareness only and should not be interpreted as medical advice. It is not a substitute for professional medical evaluation, diagnosis, or treatment. Readers should always consult their physician or another qualified healthcare provider with any questions regarding their health or medical care.

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Welcome!

## Every Woman's Heart Story Is Unique

Just like a garden filled with many kinds of flowers, every woman's heart journey is unique. We grow through different seasons, weather different storms, and bloom in our own time and our own way. We can rise with **Resilience**, learn to **Live Bravely** through uncertainty, to rediscover our **Courage**, and all of us deserve the chance to **Love Boldly** — with a heart that is understood, supported, and cared for.

## Why This Guide Matters

Heart disease is the **leading cause of death** for women, yet many women don't know their risk, don't recognize their symptoms, or don't receive the same care as men. Awareness is the first step toward changing these realities — for ourselves, our families, and our communities.



## What You'll Find Inside

This guide brings together trusted, women-centered information to help you:

- **Understand** how heart disease can look different in women
- **Recognize** symptoms early
- **Learn** about risk factors across your lifespan
- Take simple, **everyday steps** to protect your heart
- **Advocate** for yourself in health care settings
- Find **support**, community, and **tools** to help you thrive

## A Garden of Strength

Your heart story is your own — shaped by your experiences, your identity, and your life's seasons. With knowledge, support, and confidence, you can nurture your heart the way you would tend a garden: with care, attention, and hope.

May this guide help you grow with Resilience, act with Courage, Live Boldly, and always Love Boldly.



01. CURRENT DAY

## Current Situation for Canadian Women

Women continue to face unique risks and challenges when it comes to their heart health, and understanding these realities is an important first step. These gaps exist because **women's symptoms can be more subtle**, research and care have historically overlooked women, and many women are simply under-aware of their own risk. These risks are even higher for Indigenous, Black, South Asian, and newcomer women, who face additional barriers and inequities that can affect their heart health.

*• Under-Researched • Under-Diagnosed •  
Under-Treated • Under-Supported • Under-Aware • \**

- Heart disease is the #1 killer of women worldwide (1 in 3 deaths).
- Every 20 minutes, a woman in Canada dies from heart disease.
- 5x more women die from heart disease than breast cancer.

- Heart disease rates are rising among women aged 35–55.
- Many women resume old lifestyles after diagnosis, but heart disease requires lifelong management.
- Heart attack symptoms are not recognized in 78% of women
- Women with a heart attack are more likely to die than men
- More women die of heart failure than men
- More women die of stroke than men
- Sex and gender bias in women with acute coronary syndrome results in under-treatment
- Women are less likely to receive the same heart care as men, including:
  - Proven heart medications that help prevent future heart problems
  - Urgent, life-saving treatments that quickly restore blood flow during a heart attack
  - Procedures to open blocked arteries, such as stents or heart bypass surgery
  - Referrals to cardiac rehabilitation

By recognizing these gaps and learning what to watch for, you can take informed, confident steps toward better heart health—and ensure your voice, your symptoms, and your story are never overlooked.



02. SEX MATTERS

## Why Sex Matters in Heart Care

For decades, medicine has been built around a “male default” — from basic research to clinical trials to the guidelines used in everyday care. This means that much of what we know about heart disease has been shaped by studies that focused primarily on men, even though women’s hearts, hormones, symptoms, and risks can be very different.

This gap in research has **consequences**.

### How We Got Here

Historically, women were excluded from many cardiovascular studies. Even today, women make up **less than 30%** of participants in many trials. As a result, treatments, diagnostic tools, and risk calculators are often based on male physiology — and don’t always reflect how heart disease develops or presents in women.

When research doesn't include women, care can't fully serve us.

## Did you Know?

The female cardiovascular system is the second most distinct system in a woman's body, yet historically research has treated women as though they were simply smaller versions of men.



In Canada, heart disease claims more women's lives prematurely than any other condition—and the risk continues to grow.



Women are 50% more likely to be misdiagnosed after a heart attack. This delay in critical treatment leads to worse outcomes and higher mortality rates for women.



There is 5X more research into erectile dysfunction, which affects 19% of men, than into premenstrual syndrome, which affects 90% of women?



Women make up less than 30% of participants in many studies, meaning most evidence is based on men. This skews treatment guidelines toward men's experiences and risks.



Treatment gaps: Evidence shows women are less likely to receive guideline-based therapies, devices, or referrals to cardiac rehab compared to men.



## Moving Forward Together

Talking openly about sex and gender in heart health isn't optional — it's essential. When we acknowledge these differences, we can improve diagnosis and treatment for women, build more inclusive research, and create guidelines that reflect women's real experiences. It also empowers women to speak up, ask questions, and advocate for the care they deserve.

Every woman deserves care that sees her, hears her, and understands her. This guide is part of that change — helping close the knowledge gap and ensuring women's heart stories are recognized, respected, and supported.



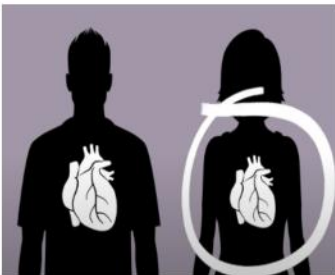
### 03. CVD IN WOMEN

## What is Cardiovascular Disease (CVD)?

Now that we've discussed the impact of heart disease on Canadian women and the existing gaps, this section will explore how cardiovascular disease specifically affects women in terms of signs, symptoms, and risk factors.

## Physical

A male and female heart looks the same overall, but...



- Women's hearts are smaller
- Women's hearts beat faster
- Women's coronary arteries are smaller
- Women's cholesterol plaque build up is different
- Women's hearts are affected by hormonal changes

As a result, some risk factors are unique to men and women.

# Types of CVD

Types of heart disease can be different for women than men.

## **Common types of heart disease:**

- Coronary artery disease
- Valvular heart disease
- Arrhythmia (irregular heartbeat)

## **Women are more likely than men to have:**

- Spontaneous coronary artery dissection (SCAD)
- Coronary vasospasm
- Microvascular dysfunction (small-vessel disease)
- Takotsubo (stress-induced) cardiomyopathy
- Peripartum cardiomyopathy (weakened heart during or after pregnancy)

Note: Women's heart disease can look different because hormonal influences, smaller coronary vessels, and unique patterns of plaque buildup affect how heart disease develops and presents in women.

Understanding how heart disease affects women differently gives you the power to recognize changes early and speak up with confidence. Your heart story matters, and you deserve care that listens, responds, and supports you every step of the way.

# Signs and Symptoms

## Differences in Men and Women

There are also differences in terms of signs and symptoms. While most men and women will describe chest pain as their primary symptom when presenting with a heart attack, the way in which the chest pain is described can differ.

### Women & Men



- Chest pain,
- Tightness,
- Pressure
- Heaviness or discomfort

### More in Women



Nausea;  
Heartburn,  
Upper  
abdominal  
discomfort



Upper back  
or shoulder  
pain



Unusual  
fatigue  
and/or  
weakness



Dyspnea,  
light  
headed



Palpitations

Be mindful that not everyone's symptoms are the same. So speak to your doctor if you are experiencing any of the symptoms mentioned.

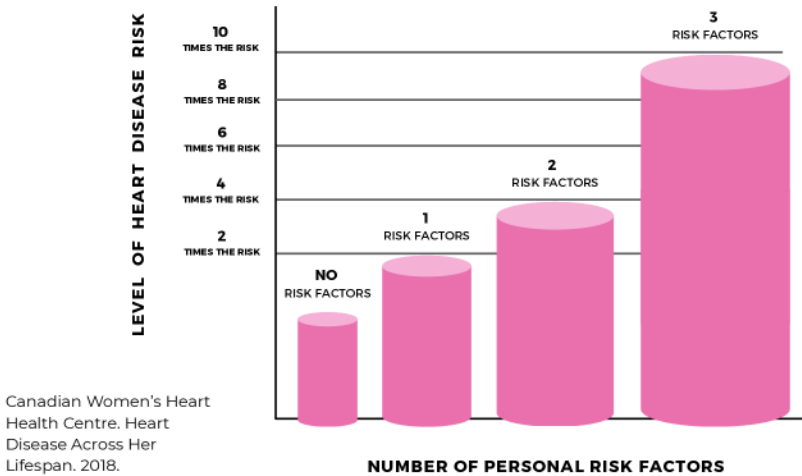
# Are You at Risk?

Risk factors are behaviors or characteristics that increase the likelihood of developing a disease.

In Canada, nine out of ten people (about 24 million) have at least one risk factor for heart disease or stroke.

Many women don't realize that their cardiovascular risk increases significantly with the number of risk factors they have:

- Risk doubles with one risk factor compare to none
- Risk quadruples with two risk factors
- Risk increases tenfold with three or more risk factors



For women (and men) over the age of 40, it is recommended to have a cardiovascular risk assessment every five years.

The sooner we manage our risk factors, the lower our chances of developing heart disease.

# Risk Assessments

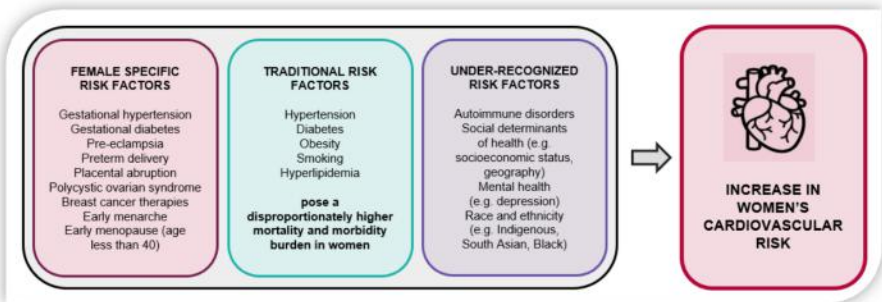
We often talk about traditional heart disease risk factors like high blood pressure, diabetes, and smoking— these are well known in the medical field.

But what's less recognized is that these same risks can have a greater impact on women. In fact, women may face serious heart-related complications even when these traditional signs aren't present.

Women's heart health is shaped by a combination of three types of risk factors:

- Female-specific risks like pregnancy-related conditions,
- Traditional risks like high blood pressure and diabetes, and
- Under-diagnosed risks such as stress, trauma, or autoimmune conditions.

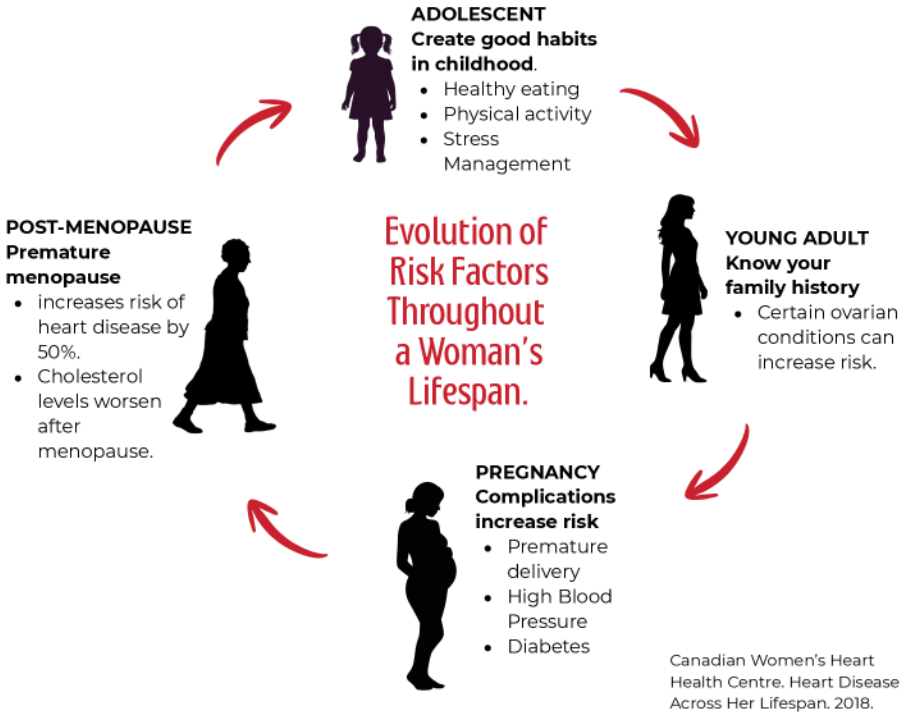
These risks can show up on their own or together, making women's cardiovascular health more complex— and often get overlooked.



Jaffer, S., Noble, M., Pozgay, A., Randhawa, V., et al. (2023, December 9). The development of a chest pain protocol for women presenting to the emergency department. *Canadian Journal of Cardiology Open*. [https://www.cjopen.ca/article/S2589-790X\(23\)00371-2/full-text](https://www.cjopen.ca/article/S2589-790X(23)00371-2/full-text)

# Life Span

Heart disease affects women of all ages, and every stage of life can influence risk. That's why it's so important to know and understand your risk factors.



Other lifelong risk factors include autoimmune diseases like lupus or rheumatoid arthritis, history of breast cancer treatment, migraines, and depression, all of which can significantly impact heart health.

What is important to remember is no matter your age, it's essential to take proactive steps to protect your heart — because prevention and awareness truly save lives.

## Understanding Risk: The 4 M's

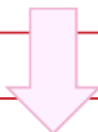
A woman's heart health changes throughout her life. **Menstruation**, **Maternal** (pregnancy), **Menopause**, and **Mental Health** each shape cardiovascular risk in different ways. Understanding these shifts helps women notice changes early and take steps to care for their hearts.

### MENSTRUATION

A woman's first period marks more than a milestone — it can also offer early clues about future heart health.

- Early menstruation (before age 11) is linked to a higher risk of heart disease later in life.
- Irregular cycles, polycystic ovary syndrome (PCOS), and heavy bleeding can signal hormonal or metabolic conditions that influence cardiovascular risk.

Reproductive history is an important part of heart health conversations. If you've experienced early periods, irregular cycles, or PCOS, talk with your health care provider about how these factors may shape your long-term risk.



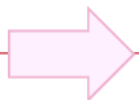
### MATERNAL

Pregnancy is one of the greatest physical and emotional tests a woman's heart will face. Even healthy women can develop complications that increase lifelong cardiovascular risk.

Pregnancy-related conditions linked to higher heart and vascular risk include:

- Hypertensive disorders of pregnancy (high blood pressure, preeclampsia)
- Gestational diabetes
- Preterm birth
- Pregnancy loss

These conditions are powerful early warning signs. Women who experience them should receive ongoing heart health monitoring, including blood pressure, cholesterol, and glucose screening.



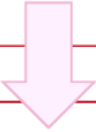


## MENOPAUSE

The transition into perimenopause and menopause brings hormonal changes that can affect the heart and blood vessels.

- Cholesterol levels often rise after menopause.
- Blood pressure may increase, especially after age 50.
- Premature menopause (before age 40) increases heart disease risk by up to 50%.

Types of menopause matter — natural, surgical, early, or premature — and should be part of your heart health discussion. Talking with your doctor about options, including whether hormone therapy is appropriate for you, can support long-term cardiovascular health.



## MENTAL HEALTH

Emotional wellbeing is deeply connected to heart health.

- Women are more likely to experience depression and anxiety, especially after a cardiac event.
- Chronic stress, trauma, and caregiving responsibilities can increase heart and vascular risk.
- Conditions like depression can make it harder to maintain healthy habits or recognize symptoms early.

Integrated mental health support — counselling, stress-management strategies, community connection — is essential for whole-heart health.

Heart disease affects women at every age, but the **4 M's** offer a clear way to understand how risk evolves across a woman's life. Whether you're navigating menstruation, maternal (pregnancy), menopause, or mental health challenges, each stage provides an opportunity to check in, ask questions, and take steps that support your heart.

Your heart story is shaped by your life story — and you deserve care that understands both.

## Traditional Modifiable Risk Factors

Other than depression, some other traditional risk factors actually have a greater impact on women. By managing these modifiable risk factors, **up to 80% of heart disease cases in women can be prevented.**



### Tobacco use

- Cardiovascular risk in women who smoke is 25% greater than for men



### Diabetes

- Earlier risk for stroke, heart attack and heart failure compared to non-diabetic
- 2X risk for heart attack and stroke compared to men



### Hypertension

- More common in women than men for age under 60 years old
- Less well controlled



### Obesity

- Obesity increased risk of Coronary Artery Disease by 64% in women, compared with 46% in men



### **Stress/ Depression**

- greater than 50% Increased risk of cardiac event



### **Cholesterol**

- High LDL women under 65 years old
- Low HDL and increased Triglycerides women under 65 years old are strong predictors of cardiovascular disease

## **Un-modifiable General Risks**

- **Age** - risk rises as women get older
- **Family history** - early heart disease in a parent or sibling increases risk
- **Ethnicity** - Some groups, including South Asian, Black, Indigenous, and Filipino women, face higher risk
- **Genetics** - inherited conditions like high cholesterol or cardiomyopathy

## **Un-modifiable Female-Specific Risk Enhancers**

- **Pregnancy complications**
- **Early menopause**
- **Polycystic ovary syndrome (PCOS)**
- **Autoimmune diseases**

# Risk Checklist

Start the conversation about your heart health with your doctor:



HeartLife.ca  
LifeInHearts.ca

## Heart Health Risk Checklist

A conversation starter \*

### HOW IS MY HEART?

Start the conversation with your doctor about your personal risk factors for developing heart disease and what you can do now to reduce your risk.

Heart disease is the #1 killer of women and affects women of all ages with 1 in 3 women are affected by heart disease. The good news is 80% of risk factors can be modified.

**ABOUT YOU:** Age: \_\_\_\_\_ Ethnicity: \_\_\_\_\_

### RISK FACTORS :

- |                                   | YES                   | NO                       |                                       | YES                   | NO                       |
|-----------------------------------|-----------------------|--------------------------|---------------------------------------|-----------------------|--------------------------|
| Do you have high blood pressure?  | <input type="radio"/> | or <input type="radio"/> | Have you been pregnant?               | <input type="radio"/> | or <input type="radio"/> |
| Do you have high cholesterol?     | <input type="radio"/> | or <input type="radio"/> | Have you been through menopause?      | <input type="radio"/> | or <input type="radio"/> |
| Are you diabetic or pre-diabetic? | <input type="radio"/> | or <input type="radio"/> | Diagnosed with an autoimmune disease? | <input type="radio"/> | or <input type="radio"/> |

### LIFESTYLE BEHAVIOURS:

- |                                     | YES                   | NO                       |   | YES                   | NO                       |
|-------------------------------------|-----------------------|--------------------------|---|-----------------------|--------------------------|
| Do you eat well?                    | <input type="radio"/> | or <input type="radio"/> | Do you feel stress / anxiety sometimes? | <input type="radio"/> | or <input type="radio"/> |
| Do you exercise regularly?          | <input type="radio"/> | or <input type="radio"/> | Do you drink alcohol?                   | <input type="radio"/> | or <input type="radio"/> |
| Do you smoke, vape or use cannabis? | <input type="radio"/> | or <input type="radio"/> | Do you sleep well?                      | <input type="radio"/> | or <input type="radio"/> |

### FAMILY HISTORY:

- |   | YES                   | NO                       |
|---|-----------------------|--------------------------|
| Does anyone in your family have diabetes?             | <input type="radio"/> | or <input type="radio"/> |
| Is there a family history of heart disease or stroke? | <input type="radio"/> | or <input type="radio"/> |
| Anyone in your family have high blood pressure?       | <input type="radio"/> | or <input type="radio"/> |

### MEDICATIONS, VITAMINS AND OTHER

Bring with you a complete list of your prescription medications, vitamins, and other treatments you are using.



\* This checklist is meant as a conversation starter between you and your doctor about your heart health and risk for developing heart disease. It is not intended as a medical diagnosis document. (ver 3.0 / 2025)



#### 04. WHAT CAN YOU DO?

## What Can You Do?

If you have any risk factors, **YOU** can start taking action to improve your lifestyle. It's never too late for change!

Let's discuss simple, everyday ways to protect your heart and lower your risk of heart and vascular disease.

### Prioritize

The first thing you need to do is start by making yourself a priority.

To take care of others, you must first take care of yourself.

“You deserve to be a priority, not a backup plan”  
- Mark Twain

## Take Action

Managing your risk for heart disease — or better managing your heart disease — is possible. And the change can start right now, with you.

**Heart disease is largely preventable.** If you have any risk factors, it's time to take action to manage them.

Let's explore some practical strategies together that can help you take control of your heart health.



**Be active!**  
Keep moving



**Eat a variety of healthy foods**



**Manage stress**



**Live free of smoking, vaping & cannabis**



**Limit or abstain from alcohol**



**Get regular check-ups**

Hu, F. B., et al (2000). *New England Journal of Medicine*, 343(8), 530-537

**Reminder:** To take care of others, you need to first take care of yourself.

# Healthy Eating

Think about the small, consistent changes that can support your heart health eating every day.



- 1 Plan your meals and cook at home.
- 2 How you eat is as important as what you eat.
- 3 Listen to your body. Eat when you're hungry and stop when you feel satisfied.
- 4 Eat at regular times. Eat breakfast within 1 to 2 hours after waking up.
- 5 Plan healthy snacks.
- 6 Eat a variety of vegetables and fruit at every meal.
- 7 Eat whole grains more often.
- 8 Eat fish at least twice a week.
- 9 Include legumes like beans, chickpeas, lentils, nuts and seeds more often.
- 10 Don't be afraid of fat - You need fat for good health, and it adds flavour to your cooking.

**For Canadian  
food guidelines:**



[food-guide.canada.ca](https://www.food-guide.canada.ca)

## Active Living

Think about the small, consistent changes, that can support your heart health every day.



- 1 Get your heart pumping every day
- 2 Work your other muscles
- 3 Work your balance
- 4 Any exercise is great
- 5 Track your progress
- 6 Warm up and cool down
- 7 Listen to your body
- 8 Use the talk test
- 9 Upping your game? Check in with an expert
- 10 Sit less, move more



# Emotional Health

Taking care of your mental health is just as important as caring for your heart. Small, consistent steps can make a big difference in your overall well-being.



- 1 Practice deep breathing
- 2 Name your emotions
- 3 Try not to judge your emotions
- 4 Know your emotional triggers
- 5 Be more mindful
- 6 Move your body
- 7 Talk to someone you care about
- 8 Sleep well
- 9 Stop “shoulds” in their tracks
- 10 Do the things that make you happy



# Managing Stress

Taking care of your mental health is just as important as caring for your heart. Small, consistent steps can make a big difference in your overall well-being.



- 1 Exercise regularly
- 2 Breathe deeply
- 3 Be aware of quick fixes
- 4 Notice your thoughts
- 5 Relax the muscles in your body
- 6 Recognize what you can not control
- 7 Take a break
- 8 Make time for things you enjoy
- 9 Avoid exposure to stress
- 10 Evaluate your commitments



## Sleep

Prioritizing rest is essential for your heart and overall well-being. Aim for habits that help your body and mind unwind.



- 1 Keep a consistent sleep schedule
- 2 Limit screen time before bed
- 3 Create a calm, comfortable sleep environment
- 4 Avoid caffeine and heavy meals late in the day
- 5 Build a relaxing bedtime routine that helps you wind down

## Self Management

Taking an active role in your heart health can make a meaningful difference. These small steps help you stay informed, confident, and connected to your care.

- 1 Heart disease is largely preventable
- 2 Be your own advocate
- 3 Know your numbers
- 4 When in doubt, check it out!
- 5 Talk to your health care providers about your health status



## Talking with Health Care Providers

Good health care is a partnership between patients and their health care providers.



- **Prepare for your visit.** Make a list of the health concerns you want to talk about. Keep in mind that you might only have time to talk about one thing, so tell your doctor about your most important concern first.

- **Use the “Ask 3 Questions’ Approach”:**

1. What is my main health problem?
2. What do I need to do?
3. Why is it important for me to do this?



- **Know your medicines, vitamins and supplements.** Bring a complete list of what you take so you and your doctor make the best decisions about your treatment. Pharmacists are an excellent resource as well.



- **Take notes.** Write down the things you talk about, and the decisions you make with your health care team. This will help you remember what you decided, and what you need to do.

**TIP:**

Make sure to share symptoms, changes, and how your condition affects daily life.



- **Take someone with you.** Bring a trusted friend or a member of your family to help you at your visits. He or she can help take notes and ask questions.



- **Recap.** At the end of your appointment, tell your doctor or nurse what you plan to do and when and how you'll do it.



- **Ask for definitions.** It's okay to say you don't understand. Health information that's new can be confusing. If someone on your health care team uses terms you don't understand, ask him or her to explain again, in plain language.



- **Follow-up.** If you get home and still have questions, call or send an email message to your health care team.



## 05. SPOTTING SYMPTOMS

# Spotting Symptoms and Getting Help Early

Knowing how to recognize heart symptoms and when to seek urgent care can help you act quickly, trust your instincts, and protect your heart.

## What to Do if You Think You're Having Symptoms.

- **Listen to your body** - Women's heart symptoms can be subtle. If something feels unusual or "off," pay attention.
- **Don't wait** - Symptoms that come and go or don't improve need immediate attention.
- **Call 9-1-1** - If you think it could be your heart, call emergency services and say, "I'm concerned this may be my heart."
- **Trust yourself** - You know your body best. Acting early protects your heart.

# When to Seek Urgent Care

**Seek help right away** if you experience:

- Chest pressure, tightness, or discomfort
- Sudden shortness of breath
- Overwhelming or unusual fatigue
- Pain in the jaw, neck, shoulder, arm, or upper back
- Nausea, vomiting, or cold sweats
- Dizziness, fainting, or feeling light headed
- A fast, irregular, or pounding heartbeat

**When in doubt, get checked** - Emergency teams would always rather see you early than too late.

**Your symptoms matter** - You deserve care that responds quickly and takes your concerns seriously.

**REMINDER:** Your heart matters — and responding quickly when something feels wrong can make all the difference.

## How to Track Your Symptoms.

Using tools like the HeartLife Passport and Toolkit to track your daily symptoms, vitals, and how you're feeling can help you spot changes early and share clearer information with your care team.

Free to download at [HeartLife.ca / passport](https://HeartLife.ca/passport)





## 06. SUPPORTS

# Supports Available

There are supports available to you if you are diagnosed or if you are a caregiver or just looking for more information.

This is not an exhaustive list but rather a starting point for your research.



[HeartLife.com](https://HeartLife.com)



[LifeInHearts.ca](https://LifeInHearts.ca)



CANADIAN WOMEN'S  
HEART HEALTH CENTRE  
CENTRE CANADIEN DE SANTÉ  
CARDIAQUE POUR LES FEMMES

NATIONAL  
ALLIANCE  
NATIONALE



CWHHA.ca



Heart&Stroke™



Heart&Stroke.ca



**Carolyn Thomas**

Blogger and Author



MyHeartSisters.org

## Canadian Supports – Websites with Facebook Communities

**Canadian Women with  
Medical Heart Issues**

· HeartLife Women

**Heart Health Support**

· HeartLife Foundation

**Community of Survivors**

· Heart & Stroke

**CANChat SCAD**

· Ottawa Heart Institute / CWHHA

## Canadian Websites to Consider

**Canadian Women's Heart  
Health Alliance (CWHHA)**

· CWHHA.ca

**Women's Health  
Collective Canada (WHCC)**

· WHCC.ca.

**Canadian Heart Failure Society**

· HeartFailure.ca

**"The Heart Hub"**

· ourhearthub.ca

**Heart Valve Voice Canada**

· chrsonline.ca

**Canadian Heart Rhythm Society**

· chrsonline.ca



## 07. GLOSSARY

# Glossary of Terms

A brief glossary covering words used in this guide. For a comprehensive glossary please go to **HeartLife.ca**



### **Angina**

Chest discomfort or pressure caused by reduced blood flow to the heart. It may feel like tightness, heaviness, or burning.

### **Atrial Fibrillation (AFib)**

A common type of irregular heartbeat where the upper chambers of the heart beat fast and unevenly. It can cause palpitations, fatigue, or shortness of breath and increases the risk of stroke if untreated.

### **Arrhythmia**

An irregular heartbeat — too fast, too slow, or uneven. Some arrhythmias are harmless; others need medical attention.

### **Blood Pressure**

The force of blood pushing against artery walls. High blood pressure (hypertension) increases the risk of heart disease and stroke.

### **Cardiac Rehabilitation**

A supervised program of exercise, education, and support that helps people recover after a heart event and reduce future risk.

### **Cardiovascular Disease (CVD)**

An umbrella term for conditions that affect the heart and blood vessels, including heart attacks, heart failure, arrhythmias, and stroke.

### **Cholesterol**

A fatty substance in the blood. High LDL (“bad”) cholesterol and low HDL (“good”) cholesterol can raise heart risk.

### **Coronary Artery Disease (CAD)**

A condition where the arteries that supply blood to the heart become narrowed or blocked by plaque buildup. It’s the most common type of heart disease and can lead to angina or heart attacks.

### **Female-Specific Risk Factors**

Risks unique to women, including preeclampsia, gestational diabetes, premature delivery, PCOS, and early menopause.

### **Guideline-Based Therapies**

Treatments recommended by medical experts based on strong research and clinical evidence. Examples include statins (to lower cholesterol), beta blockers (to reduce heart workload), and ACE inhibitors (to help relax blood vessels).

### **Heart Attack (Myocardial Infarction)**

Occurs when blood flow to the heart muscle is blocked. Symptoms in women can be subtle, such as fatigue, nausea, or back/jaw pain.

## **Heart Failure**

A condition where the heart can't pump blood as well as it should. It does not mean the heart has stopped.

## **Microvascular Disease**

A condition where the small blood vessels of the heart don't work properly. More common in women and can cause chest pain.

## **Plaque (Atherosclerosis)**

A buildup of cholesterol, fat, calcium, and other substances inside the arteries. Over time, plaque can harden or rupture, reducing blood flow and increasing the risk of heart attack or stroke.

## **Risk Factors**

Behaviours or conditions that increase the chance of developing heart disease — such as high blood pressure, diabetes, smoking, stress, or pregnancy-related complications.

## **SCAD (Spontaneous Coronary Artery Dissection)**

A tear in a coronary artery that reduces blood flow to the heart. It often affects younger, healthy women.

## **Symptoms**

Changes in how your body feels — such as chest pressure, shortness of breath, fatigue, nausea, or dizziness — that may signal a heart problem.

## **Triglycerides**

A type of fat in the blood. High levels can increase the risk of heart and vascular disease.

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## **Feedback or Questions:**

We welcome a chance to hear from you! Email us:

**[LifelnHearts@HeartLife.ca](mailto:LifelnHearts@HeartLife.ca)**

# Thank you

Your heart carries your stories — the seasons you've weathered, the strength you've grown, and the hope that continues to rise within you. No two journeys look the same, and that is part of their beauty.

As you move forward, may you feel supported, informed, and empowered to care for your heart with the same tenderness you would offer a garden you love. Small steps, steady attention, and moments of courage all help your heart flourish.

You deserve care that listens.

You deserve care that believes you.

You deserve care that sees you fully.

May you continue to grow with **Resilience**, act with **Courage**, **Live Boldly**, and always **Love Boldly**.



*Resilience*



*Courage*



*Live Boldly*



*Love Boldly*

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