

Getting to the Heart of

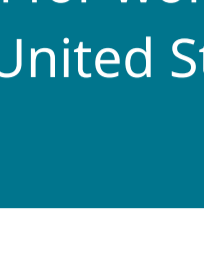
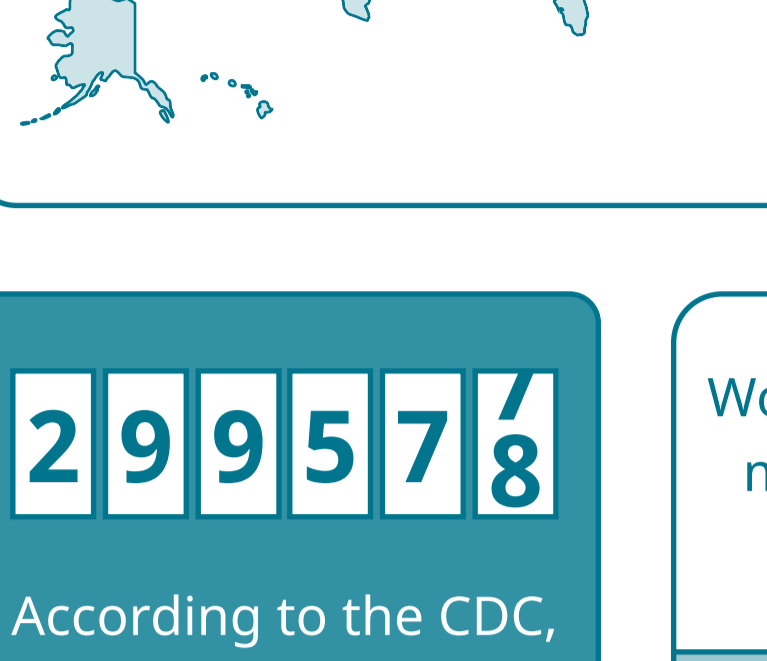
Acute Coronary Syndrome in Women



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Definition: Acute coronary syndrome (ACS) is a group of clinical syndromes characterized by sudden myocardial ischemia caused by obstruction of coronary blood flow, generally due to rupture of an atherosclerotic plaque.

Facts and Figures



Heart disease is the leading cause of death for women in the United States.

299,578

According to the CDC, in 2017 alone, **299,578** women lost their lives to heart disease.

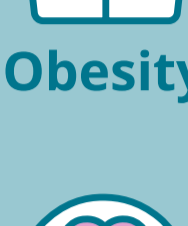


This works out to 1 in every 5 female deaths for 2017

Women with ACS experience more **comorbidities** than men including:



Smoking



Obesity

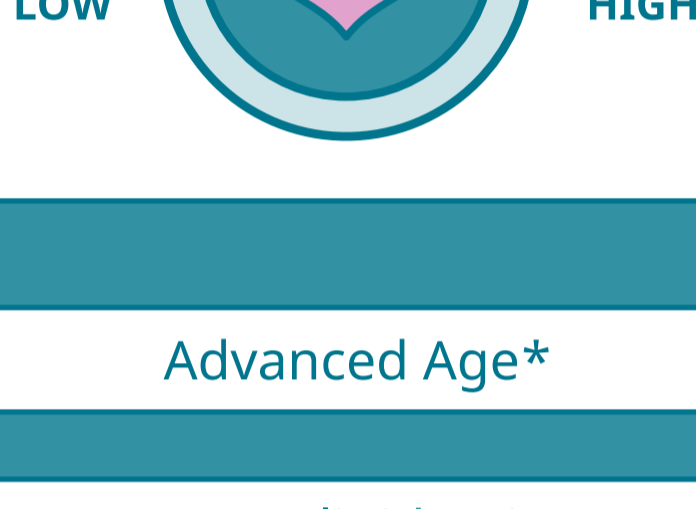


Poor Mental Health



After a myocardial infarction event, women have decreased cardiac rehabilitation referral rates, less physical activity, and decreased health outcomes **compared with men.**

Risk Factors



Advanced Age*

Hyperlipidemia

Physical Inactivity

Excessive Alcohol Consumption

Family History of ACS

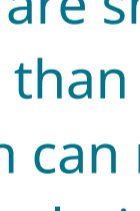
*Risk rises exponentially after the age of 60



Women are **more likely** than men to exhibit atypical myocardial infarction symptoms and **less likely** to present with chest pain.

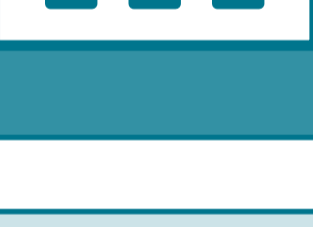
2x

Atrial fibrillation doubles the risk of myocardial infarction in women with ACS.



Arteries are smaller in women than in men, which can make revascularization more difficult.

Signs and Symptoms



Prodromal symptoms (e.g., sleep disturbances, unexplained anxiety) can appear weeks or even months before the acute coronary event.



Chest pain can be right-sided



Nausea



Unexplained anxiety



Transient pain in the jaw, neck, or back



Shortness of breath



Palpitations

Food For Thought

Researchers evaluating changes in the outcome of treatment of **11,536** women for ACS during the period 2000–2010 noted a significant reduction in 30-day major adverse cardiac events and 1-year mortality among these patients during this timeframe. The investigators concluded that these improvements in clinical outcome were due to increased use of evidence-based cardiovascular therapies by healthcare providers.

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