Primary prevention of coronary heart disease in men and women: does 1 size fit all? Yes!
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Abstract

Cardiovascular disease remains the leading cause of mortality in both women and men in the industrialized nations. Coronary heart disease (CHD) accounts for the single largest share of this toll in both sexes. Although it had long been known that the number 1 cause of death in men is CHD, it was determined only relatively recently that this was also true in women. Identification of the traditional risk factors (RFs) for CHD by the Framingham Heart Study and other investigations during the last 5 decades has provided the basis of preventive cardiology. These RFs can be considered as fixed or modifiable. Numerous epidemiologic and clinical studies have demonstrated that, with few exceptions, the major RFs that increase the hazard for CHD are the same for both men and women, whether fixed (age, sex, family history) or modified (lipids, blood pressure, smoking). A number of other RFs are under investigation and await confirmation in rigorous prospective studies. Even those conditions unique to women, which can predispose patients to CHD, such as polycystic ovaries and complications of pregnancy, act through provocation of the traditional RFs. Thus, the large body of evidence that supports the similarity of RFs for CHD in men and women provides a rational foundation for similar strategies of prevention in the 2 sexes. © 2011 Wiley Periodicals, Inc. The author has no funding, financial relationships, or conflicts of interest to disclose.