

# Pacific HeartBeat

JANUARY 2022 NEWSLETTER

## Secret Facts of Heart Attacks

by Adrienne White



Adrienne White

When recovering from open heart surgery, imagine my shock when I read this stat from the Heart & Stroke Foundation: Early Heart Attack Signs Are Missed in 78% of women. How is that even possible these days?

Turns out, the reasons aren't as shocking as you might think.

For starters, two-thirds of the cardiac research in the world is done on men. Often by men. As the typical bread winners, you could say it made some sense back in the day, plus there was another challenge with women...

Hormones. Men and women both have hormones of course, but the monthly cycle for women can make the baseline of a study complicated. Plus, women are just small men, right? As it turns out, the female heart is slightly different.

All of our medical professionals and first responders were trained using the research we have, which means even people who were top of their class know much,



Photo by RODNAE Productions from Pexels

more about heart attacks in men. It also means that the tools used to detect heart attacks work better on men. Put another way, they typically don't know a lot about the heart of a woman.

Now, that wouldn't necessarily be a bad thing today if the majority of women were strong advocates for their health and well-being. Sadly, after centuries of being labelled with the medical diagnosis of "hysterical" (an exclusively female issue that was in the

medical books until—wait for it—1980), many women are reluctant to "make a fuss." We trust our doctors over our own instincts, and we are busy taking care of everyone else first. So, we can be our own worst enemies.

You may think that doesn't matter, because everyone knows what a heart attack looks like, right? No. I've seen one realistic description of a typical heart attack for women on TV and in movies. Just one.

*Continued overleaf...*

## Hospital Donations

In December 2021, the Pacific Open Heart Association presented cheques of \$3,000 to cardiac units at each of the following hospitals: St. Paul's Hospital, Vancouver General Hospital, Royal Columbian Hospital, and Surrey Memorial Hospital.



**St. Paul's Hospital**  
Stefanie MacLeod,  
Patient Care Manager (Heart Ward),  
with Richard Lemire, POHA



**Vancouver General Hospital**  
Jay Chambers, POHA,  
with Tina Oye,  
Clinical Educator, Cardiac Sciences



**Royal Columbian Hospital**  
Glen Doherty,  
Manager, Heart Surgery Ward  
with Mike Martin, POHA



**Surrey Memorial Hospital**  
Sarah Weinkam,  
Clinical Nurse Educator,  
with Alfred Buchi, POHA

## Pillow Talk

The history of the Pacific Open Heart Association Heart Pillows dates back to 1989, when BC Tel and Heart & Stroke first sponsored the initiative. After becoming TELUS in 1998, the Heart Pillows continued to be generously supported through both TELUS' Community Connections and later, TELUS Ambassadors.

Over its history—to align with the evolution of our sponsors—the association has designed and produced five versions of the Heart Pillow to reflect the generosity of our partners. Since the first pillow was given out, over 32,000 heart patients have found comfort using our distinctive heart pillows in recovery.



The heart image appeared on versions one to four. It was discontinued on version five to reduce production costs.

## Secret Facts of Heart Attacks (continued)

Even as I was out for lunch and started to experience 'weird symptoms' my older (and frankly wiser) friend thought I had indigestion. Turns out I had a 100% arterial blockage plus a few in the 75–85% range. Thankfully the restaurant manager quietly mentioned that she thought I may be having heart attack symptoms, so my friend drove me to the local hospital. I had the heart attack in the hospital followed by stents and a quadruple bypass.

The whole heart attack experience was odd, quiet, and inconvenient—and certainly NOT what a heart attack looks like on TV. If I had been home instead of out with a friend, I probably would have just had a nap.

What were my symptoms? Unexplained fatigue. Nausea. Weak, achy arms, and a bit out of breath when I talked. Slight pressure in the side of my neck. A bit of heaviness in my chest. I'd get these weird symptoms, then they would pass. I felt fine, until the next wave. The key word here is 'unexplained' (and believe me, I tried to explain it all away).

You can look on the internet for all the signs, and keep in mind, these are also true for some men. You'll also see that women have risk factors that men don't have.

As a visitor with the Pacific Open Heart Association, I have noticed that there are far more men than women in the ward. Is that because men get far more heart attacks? No. One reason is because women don't make it to the hospital because they were never diagnosed and didn't recognize the symptoms.

What can we do about it? Make sure you have the information (and now you do), then share it. It's that simple. Yes, there are systemic things in society that need to shift, but we don't need to wait for it. We can start talking now.

*Adrienne White is an educator, leadership coach and professional speaker in Vancouver, BC. You can learn more about her free, light-hearted, heart talk on the community tab of her web page: [LeadersLanding.com](http://LeadersLanding.com).*



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<https://www.pacificopenheart.org>

## President's Report



Richard Lemire

I would like to thank Rolf Gullmes, our past president, for his work during his term. Rolf guided POHA through some trying times with Covid.

Covid has brought many changes to POHA. The most noticeable

change is that there are no heart patient visitations at this time. To some members it seems that POHA has been placed on hold. Quite the contrary, your Board, with guidance and help from Director Nancy Farrell, has continued to meet on Zoom. We have identified areas that need improvement and are working towards implementing actions that will address these concerns. Increased communication with our membership and our presence in the non-profit Health Care Community is now being addressed. Our website has been updated and a new POHA Facebook page has been developed.

Discussion with the hospitals regarding safety protocols for the return of POHA visitors is underway. We need to be sure that both patients and our POHA visitors are safe.

At our November Board Meeting we welcomed Bernie McNeil as a new Board member. Bernie is a visitor at Royal Columbian Hospital and an active participant in the RCH pre-admission clinic.

At the same meeting we accepted the resignation of long time Board member Patrick Hagan. During the past 20 years Patrick was instrumental in the reintroduction of POHA volunteer visitors at RCH. Patrick also co-chaired the team leadership at RCH, and co-edits the *HeartBeat* newsletter. For a few years he was team captain of the Pacific Open Heart Zippers, a run team participating in the Vancouver Sun Run. Patrick helped develop our POHA website and continues as its webmaster.

POHA does not receive any government funding. Paid up membership, bequests and donations allow POHA to continue.

Volunteer patient visitors, volunteer committee members and volunteer Board members continue to be the life blood of POHA.

Thank you to all of you for donating your time and energy.

Stay safe, wear your mask when out and wash your hands when you return home.

**Richard Lemire**

*President, Pacific Open Heart Association*