

# Under-Recognized Threats for Cardio-Vascular Disease (CVD) and Health of Women

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## Abstract

*Cardiovascular Disease (CVD) remains the leading cause of morbidity and mortality among women globally weighing, substantially, and disproportionately compared to men. Common factors like high blood pressure, abnormal cholesterol levels, diabetes, poor diet, obesity, smoking, and lack of physical activity have been acknowledged. New evidence indicates the existence of several lesser-known risk factors that specifically affect women's cardiovascular health. This paper provides an analysis of these under-recognized risk factors, which include psychosocial variables, intimate partner violence (IPV), health literacy, poverty, unstable economic conditions, and socioeconomic and cultural issues. Through recognition and action on these often-overlooked factors influencing women's cardiovascular health, the world community can improve women's health more broadly. A systematic review of past twenty years existing literature which were selected from data base PubMed, Scopus and Google Scholar was conducted to collect and analyze the relevant data.*

**Keywords:** Cardiovascular Disease, Women's Cardiovascular Health, Improving Women's Health

## Introduction

An international health emergency, cardiovascular disease (CVD) claims millions of women's lives annually. There area number of under-documented risk factors that contribute to the rise of cardiovascular disease burden on women. This article focuses on recent research and literature from around the world to present a thorough analysis of these lesser-known risk factors. It is very important to understand the traditional risk factors and under-documented risk factors that affect the health of women's hearts to achieve better health outcomes by developing prevention and treatment strategies.

## Psychosocial Disorder Risk Factors

Stress and depression are two major psychosocial factors contributing to the rising incidence of Cardiovascular Disease (CVD) among women. Depression is regarded as a chronic illness that affects 18 percent of men and 26 percent of women. Depression is a major risk for Coronary Heart Disease (CHD). Depression among women is two times higher than that in men.

Women have the greatest risk for developing cardiovascular disease due to depression and stress since women are experiencing several biological changes in their lifetime such as hormonal fluctuations, reproductive functions, pregnancy, premenstrual disorders, postpartum depressive condition and menopause. Further, intake of oral contraceptive pills, infertility, miscarriage

and hormonal replacement treatments have been reported to cause depression among women. An understanding of relationship between depression and cardiovascular disease is vital for both the mental and physical outcomes of women worldwide.

### **Intimate Partner Violence (IPV)**

The study was published in the journal of the American Heart Association titled Interpersonal Trauma and Risk of Incident Cardiovascular Disease Events Among Women which states that there is a higher risk of experiencing an incident of mortality from cardiovascular disease compared to those without Intimate Partner Violence (IPV) exposure. It has been hinted by the study conducted among 18547 women from the United Kingdom with a history of Intimate Partner Violence (IPV) that had a chance of cardiovascular disease, and diabetic mellitus. A need for further research to explore mediating factors and biological markers that could enhance the understanding of the relationship between intimate partner violence IPV victimization and cardiovascular Disease (CVD) risk among young adult women.

### **Limited Health Literacy**

Inadequate health literacy and knowledge about illnesses, and medication have been linked with poorer overall health status, increased healthcare expenditure, increased hospitalization rates and increased loss of lives. A study done among women from disadvantaged communities in Israel showed that health literacy is a protective and modifiable risk factor for reducing cardiovascular risk among women. The study done among women who are above 18 years in Turkey highlights that a positive and note worthy association was observed between knowledge of cardiovascular Disease (CVD) and literacy on health and factors such as level of education, economic condition and employment significantly influencing the learning ability and implementation of health literacy in their lifetime.

### **Socioeconomic and Cultural Factors**

Socioeconomic and cultural factors, such as gender-based inequalities, social norms and culture, level of education and access to healthcare,

male dominance in family structure, and financial dependency, have a greater influence on the cardiovascular health-seeking behavior of women globally. Further, women in low- and middle-income countries often experience barriers to receiving preventive cardiovascular services, including limited financial resources, information, and societal norms that prioritize the healthcare needs of other family members.

### **Poverty and Economic Crisis**

Financial hardship and economic crises in the country have been shown to have an impact on the cardiovascular health of women who experience stress, limited access to healthcare facilities, a lack of medication, and inadequate nutrition. The increased price level associated with economic hardship contributes to this increased vulnerability. The American College of Cardiology journal highlights that women living in low-income communities have a higher risk of cardiovascular disease burden since they lack access to quality food and medication compared to women in higher-income areas and financial freedom.

### **Policy Implications and Suggestions**

Comprehensive policy interventions are essential to increase the awareness and recognition of gender-specific risks to reduce cardiovascular diseases (CVDs) among women globally. Health campaigns and training programs for healthcare professionals are required to address overlooked cardiovascular risk factors and early detection of cardiovascular issues to ensure universal health coverage through the annual budget for health sector at country level.

Promoting a healthy diet such as encouraging reduced intake of fats, salt and sugar while promoting fruit, grains and vegetable consumption from childhood is a crucial step that can be taken by nations while controlling food inflation. Most people in different parts of the world are suffering from inflation and economic crises that limit their healthy consumption and increase stress levels. Ensuring macroeconomic stability and strong policies to achieve sustainable development is highly important to mitigate increasing non-communicable diseases (NCDs) including cardiovascular disease (CVD).

Workplace wellness programs that promote healthy eating, stress management and mindfulness programs such as mediation and yoga by employers or organizations by including in human resource policies, since a healthy population is the real wealth of an organization as well as the nation. Providing access to mental health services help women to overcome stress related health issues and reduce cardiovascular disease (CVD) risk.

Promoting physical activity by creating an environment such as safe walking path especially for women, allocation of time for women to do physical activities before starting their daily routine in the workplace and promoting physical activities as a culture of the country from childhood are proactive implementation to ensure the healthy heart of every human being to ensure healthy lifestyle and improve productivity of a nation.

Empowering women with literacy initiatives to understand wellness and illness concepts and manage their health including association between biological changes in women during their lifetime and cardiovascular diseases. Further awareness programs on CVD risk factors, symptoms, regular screening and timely medical consultations enable women informed decision making regarding their lifestyle choices more effectively and it is crucial to ensure their family health. By prioritizing health education and awareness, healthcare providers and policymakers can foster a more health-conscious female population in the world.

Strengthening laws and enforcement against intimate partner violence (IPV) is a key strategy to ensure offenders are held accountable and provide legal protection for victims. Awareness programs about intimate partner violence (IPV), its health impacts and available support services can be implemented at schools, colleges, universities and workplaces are essential to reduce the occurrences of intimate partner violence which is one of the risk factors for increasing cardiovascular burden. These efforts not only promote health of women but also promoting well-being of the community and reduce social unrest.

Global collaboration and community engagement are crucial for developing culturally relevant and sustainable cardiovascular disease prevention

strategies to effectively reduce cardiovascular disease among women. Further research is important to understand the factors affecting CVD risk among women and studies are needed to examine socioeconomic status, education and access to healthcare and how uniquely affect the health of women. Furthermore, culturally sensitive research is important to understand the impact of intimate partner violence (IPV) on the health of women, since the research gap exists regarding under-recognized risk factors affecting cardiovascular diseases among women worldwide.

### Conclusion

Cardiovascular disease leads higher mortality and morbidity, with a disproportionate burden on women globally. Traditional risk factors have been well-recognized, this article highlights the growing evidence on several under-recognized risk factors that uniquely impact the cardiovascular health of women worldwide. By addressing these multifaceted determinants, including psychosocial factors, intimate partner violence, limited health literacy, socioeconomic and cultural issues, poverty, and the economic crisis, the global community can take meaningful steps towards improving the overall well-being of women and reducing the burden of cardiovascular disease.

### References

- Alshakarah, A., et al. "Awareness and Knowledge of Cardiovascular Diseases and its Risk Factors among Women of Reproductive Age: A Scoping Review." *Cureus*, vol. 15, 2023.
- Barth, J., et al. "Depression as a Risk Factor for Mortality in Patients with Coronary Heart Disease: A Meta-Analysis." *Psychosomatic Medicine*, vol. 66, no. 6, 2004, pp. 802-13.
- Bellows, Alexandra L., et al. "The Association of Cooking Fuel Use, Dietary Intake, and Blood Pressure among Rural Women in China." *International Journal of Environmental Research and Public Health*, vol. 17, 2020.
- Bowe, Benjamin, et al. "Burden of Cause-Specific Mortality Associated with PM<sub>2.5</sub> Air Pollution in the United States." *JAMA Network Open*, vol. 2, no. 3, 2019.

- Cao, Hongfu, et al. "Depression Increased Risk of Coronary Heart Disease: A Meta-Analysis of Prospective Cohort Studies." *Frontiers in Cardiovascular Medicine*, vol. 9, 2022.
- El-Serag, Rola, and Rebecca C. Thurston. "Matters of the Heart and Mind: Interpersonal Violence and Cardiovascular Disease in Women." *Journal of the American Heart Association*, vol. 9, no. 4, 2020.
- Gan, Yong, et al. "Depression and the Risk of Coronary Heart Disease: A Meta-Analysis of Prospective Cohort Studies." *BMC Psychiatry*, vol. 14, 2014.
- Greenberg, Keren L., et al. "Cardiovascular Health Literacy and Patient-Physician Communication Intervention in Women from Disadvantaged Communities." *European Journal of Preventive Cardiology*, vol. 26, no. 16, 2019.
- Havranek, Edward P., et al. "Social Determinants of Risk and Outcomes for Cardiovascular Disease: A Scientific Statement from the American Heart Association." *Circulation*, vol. 132, no. 9, 2015.
- Kivimäki, M., et al. "Job Strain as a Risk Factor for Coronary Heart Disease: A Collaborative Meta-Analysis of Individual Participant Data." *The Lancet*, vol. 380, 2012.
- Liu, Xiaoyue, et al. "Cardiovascular Risk and Outcomes in Women who have Experienced Intimate Partner Violence: An Integrative Review." *Journal of Cardiovascular Nursing*, vol. 35, no. 4, 2020, pp. 400-14.
- Loria, A. S., et al. "A Mechanistic Look at the Effects of Adversity Early in Life on Cardiovascular Disease Risk during Adulthood." *Acta Physiologica*, vol. 210, 2014, pp. 277-87.
- Magnani, Jared W., et al. "Health Literacy and Cardiovascular Disease: Fundamental Relevance to Primary and Secondary Prevention: A Scientific Statement from the American Heart Association." *Circulation*, vol. 138, 2018.
- Miller, Kristin, et al. "Long-term Exposure to Air Pollution and Incidence of Cardiovascular Events in Women." *The New England Journal of Medicine*, vol. 356, no. 5, 2007, pp. 447-58.
- Omachi, Theodore, et al. "Lower Health Literacy is Associated with Poorer Health Status and Outcomes in Chronic Obstructive Pulmonary Disease." *Journal of General Internal Medicine*, vol. 28, no. 1, 2013, pp. 74-81.
- Piccinelli, Marco, and Greg Wilkinson. "Gender Differences in Depression: Critical Review." *The British Journal of Psychiatry*, vol. 177, no. 6, 2018, pp. 486-92.
- Shim, Ruth S., et al. "Prevalence, Treatment, and Control of Depressive Symptoms in the United States: Results from the National Health and Nutrition Examination Survey (NHANES), 2005-2008." *Journal of the American Board of Family Medicine*, vol. 24, 2011, pp. 33-38.
- Suglia, Shakira F., et al. "Childhood and Adolescent Adversity and Cardiometabolic Outcomes: A Scientific Statement from the American Heart Association." *Circulation*, vol. 137, no. 5, 2018.
- Thurston, Rebecca C., et al. "Interpersonal Trauma and Risk of Incident Cardiovascular Disease Events among Women." *Journal of the American Heart Association*, vol. 11, no. 7, 2022.
- Wright, Elizabeth Novack, et al. "The Association between Intimate Partner Violence and 30-year Cardiovascular Disease Risk among Young Adult Women." *Journal of Interpersonal Violence*, vol. 36, 2021.

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