

# Young women less likely to be prescribed or take post-heart attack meds

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Young women are less likely than young men to be prescribed or to fill their medication after a heart attack, according to new research published in the American Heart Association journal *Circulation: Cardiovascular Quality and Outcomes*.

It is recommended that both male and female [heart attack](#) survivors take ACE inhibitors, beta-blockers and statins to prevent another heart attack. Yet studies have documented that rates of medication use to prevent a recurrent heart attack are lower among women than men.

"There are two possible reasons why women take fewer cardiovascular medications than men in an outpatient setting," said Kate Smolina, Ph.D., study lead author and postdoctoral fellow in pharmacoepidemiology and pharmaceutical policy at the Centre for Health Services and Policy Research, University of British Columbia, Vancouver, Canada. "It is either a consequence of physicians' prescribing behavior, or patients not taking their prescribed medication, or both."

Researchers analyzed data on more than 12,000 [heart attack patients](#) that survived for at least one year in British Columbia, Canada between 2007-09.

They found:

After leaving the hospital, only one-third of all heart attack survivors filled all of the appropriate prescriptions for at least 80 percent of the year.

Only 65 percent of women under the age of 55 initiated their treatment on all appropriate drugs after a heart attack, compared to 75 percent of men in the same age group. There was no difference between men and women in adherence to treatment; in other words, once on therapy, men and women tended to continue on it or drop out at the same rates.

"The gender gap in treatment initiation among [younger women](#) is an important finding because younger women have much worse outcomes after suffering a heart attack than do men of the same age," said Karin Humphries, M.B.A., D.Sc., study co-author and associate professor of Cardiology at the University of British Columbia. "This finding suggests that younger women should be treated aggressively, especially when we have medications that work."

Although researchers were unable to clearly determine whether the gender-based differences in treatment initiation were driven by physician prescribing practices or patient behavior (i.e. younger women might have been less likely to fill written prescriptions), researchers believe more focus is needed in treating young women after a heart attack.

"It is important for both physicians and patients to move away from the traditional thinking that heart disease is a man's disease," Smolina said. "Heart disease in [young women](#) has only recently received research attention, so it is possible that physicians and patients still have the incorrect perception that these heart medications pose risks to younger [women](#)."

Nadia Khan, MSc, M.D., another study co-author and a general internist at St. Paul's Hospital in Vancouver, Canada notes that patients should ask their physicians if they have been prescribed all of the medications that are known to benefit heart attack survivors, keep themselves informed about therapies and what they are used for by visiting the American Heart Association websites or other trusted heart health information resources, and make sure they take their medication as directed.

Provided by American Heart Association

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