

Healthy Her Fewer Americans Are Dying from Heart Attacks (Part 2)

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Interesting and encouraging data was recently published showing that heart attacks are no longer the primary cause of death for Americans. While that sounds like incredibly great news, a deeper dive reveals a more complicated story of heart attacks now being the drivers of heart failure. In other words, we survive the heart attack, but the subsequent damage done to the heart results in heart failure later. So, a bit of kicking the can down the road.

If you are in this situation, what can you do?

Reducing your risk of arrythmias after a myocardial infarction (heart attack) is crucial, as these irregular heart rhythms, especially ventricular arrythmias (originating from the lower part of the heart) can be life threatening. Often this includes a 4-drug combo (known as the Foundational 4) for the management of heart failure. These 4 classes of medications are evidence based and shown to reduce mortality and hospitalizations. They include Entresto – Sacubitril/valsartan, B-blockers, aldosterone antagonists, and SGL2 inhibitors. Statins should also be strongly considered as well as antiarrhythmic drugs (prescribed selectively).

Moreover, cardiac rehab is also a very useful adjunct, as a stronger, healthier heart is less likely to develop arrythmias and heart failure. Further, consider an implantable defibrillator as needed, especially if your heart function has decreased.

Thoughts on women:

Additionally, if you are a woman, pay extra special attention during pregnancy and menopause, as these are times in a woman's life when she can be more vulnerable to heart disease. Request that a Cardiologist be added to your pregnancy care team if you develop pre-eclampsia, hypertension or diabetes, during your pregnancy.

What else?

Manage any sleep apnea, limit alcohol and caffeine, quit smoking, eat a heart healthy diet, reduce weight if needed, manage stress, keep your routine check-ups, physically move more each day, and consider utilizing wearable devices. This includes home blood pressure monitors with app connectivity as useful tools to support a healthy heart with the best outcomes.

What does this data reveal about us as a society and profession?

We have become much better at treatment and intervention of heart attacks via therapies and biotechnological advances, but still have quite a way to go in the area of prevention.

Why do we fall short?

As Americans, we are not that great at prevention. Our strength has been in the science and application of medicine. Part of this lies in the fact that we are a fast-moving society, which often comes with some negative consequences in favor of convenience. Obesity, hypertension, sedentary lifestyles, processed and palatable fast food, decreased physical movement, smoking, cholesterol, diabetes, as well societal stressors leading to chronic inflammation are all factors. All are also risk factors for heart disease.

An ounce of prevention is still worth a pound of cure.

Best, Jayne Morgan, M.D.

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