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Cardiovascular disease in women- assessing primary and secondary risk with valid risk assessment tools

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Abstract

Women have different primary risk factors for heart disease compared to men, and the risk of heart disease among women has been seriously underestimated. The difference in primary risk factors may have contributed to the higher levels of myocardial dysfunction in women presenting with myocardial infarction (MI) compared to men. The degree of primary cardiovascular risk factors can affect the outcomes following a major cardiac event, and accurate assessment of secondary risk is warranted. Assessing for secondary cardiovascular risks among women following an initial MI requires the use of validated risk assessment tools. Three secondary cardiovascular risk assessment tools were utilized in a sample of men and women and compared for predictability. The Controlled Abciximab and device Investigation to Lower Late Angioplasty Complications (CADILLAC) risk tool with c-statistics of 0.718 for major cardiac events, and 0.860 for death in hospital, emerged as the most predictive tool for assessing secondary cardiovascular risks among women after treatment for an acute MI. All of the women were treated invasively for MI and this may have contributed to the accuracy of the CADILLAC risk tool in predicting secondary risk, as it contained elements relating to clinical data that were available only during angiography. However, the Thrombolysis in Myocardial Infarction (TIMI) risk tool was most predictive for non-major cardiac events.

Biography

Elizabeth Scruth RN has recently completed her PhD from the Australian Catholic University in Melbourne Australia. Her publications include book chapters on cardiovascular disease; papers related to primary and secondary cardiovascular risk assessment in women and critical care illness. Currently Elizabeth is a Clinical Practice Consultant in the Clinical Effectiveness Team- Quality Department: Kaiser Permanente Northern California Quality and Regulatory Services. Dr Eugene Cheng and Professor Linda Worrall-Carter served as Elizabeth's academic supervisors during her research on women and cardiovascular disease.

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