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WOMEN'S SYMPTOMS ARE NEW OR DIFFERENT PRIOR TO HEART ATTACK

A study of women's symptoms prior to heart attack indicates that about 95% said they knew their symptoms were new or different a month or more before experiencing their Acute Myocardial Infarction (AMI). This was true even when the symptoms were common ones and varied in severity. The most frequently reported symptoms were unusual fatigue (70.7%), sleep disturbance (47.8%), and shortness of breath (42.1%). Notably, fewer than 30% of the women reported chest pain and discomfort prior to AMI, and 43% did not experience chest pain during AMI. Most clinicians continue to consider chest pain as the most important AMI symptom for both women and men.

This study is one of the initial investigations of women's experience with heart attacks, and how this experience differs from men's. Recognition of symptoms that provide an early indication of heart attack, either imminently or in the near future, is critical to forestalling or preventing the disease.

The article describing the study, entitled "Women's Early Warning Symptoms of AMI," appears in today's rapid access issue of "Circulation: Journal of the American Heart Association". The study was funded by the National Institute of Nursing Research (NINR), part of the National Institutes of Health, Department of Health and Human Services.

Jean McSweeney, PhD, RN, Principal Investigator of the study at the University of Arkansas for Medical Sciences in Little Rock, said, "Symptoms such as indigestion, sleep disturbances, or weakness in the arms, which many of us experience on a daily basis, were recognized by many women in the study as warning signals for AMI. Because there was considerable variability in the frequency and severity of symptoms," she added, "we need to know at what point these symptoms help us predict a cardiac event."

There were 515 women participating in the study from 5 sites in Arkansas, North Carolina and Ohio. The women were mostly Caucasian, high school educated and older, and all had all been diagnosed with AMI within the previous 4 to 6 months. Their memories of their prodromal and acute symptoms were assessed using the McSweeney Acute and Prodromal Myocardial Infarction Symptom Survey (MAPMISS). This survey lists 33 prodromal and 37 acute symptoms previously identified in an earlier study. The women responded to the survey by telephone, rating the prodromal symptoms according to intensity, frequency, and duration. They rated acute symptoms by intensity. They also described whether the symptoms were new or changed in intensity or frequency prior to the AMI, and whether they disappeared or returned to usual patterns following the attack.

According to Patricia A. Grady, PhD, RN, Director of the NINR, "Increasingly, it is evident that women's symptoms are not as predictable as men's. This study offers hope that both women

and clinicians will realize the wide range of symptoms that can indicate heart attack. It is important not to miss the earliest possible opportunity to prevent or ease AMI, which is the number one cause of death in both women and men."

Major prodromal symptoms in order of reported frequency include:

- Unusual fatigue - 70%
- Sleep disturbance - 48%
- Shortness of breath - 42%
- Indigestion - 39%
- Anxiety - 35%

Major acute symptoms during AMI in order of reported frequency include:

- Shortness of breath - 58%
- Weakness - 55%
- Unusual fatigue - 43%
- Cold sweat - 39%
- Dizziness - 39%

Dr. McSweeney continues to explore women's symptoms of AMI, including possible ethnic and racial differences.

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