



ESC

European Society
of Cardiology

Closing the gaps in the cardiovascular care of women

ESC Statement on 'The Lancet women and cardiovascular disease Commission: reducing the global burden by 2030' report.

The European Society of Cardiology (ESC) welcomes the publication of the “The Lancet women and cardiovascular disease Commission: reducing the global burden by 2030” report, which outlines the gaps in cardiovascular disease (CVD) research, prevention, treatment, and access to care for women.

CVD is the leading cause of death in women, both in Europe and worldwide. Yet, compared to men, women with CVD are typically underdiagnosed and undertreated. Why?

- **Differences in the aetiology and clinical presentation of CVD** leading to misdiagnosis and dismissal of symptoms as anxiety-related. For instance, women are more likely to present with myocardial infarction/ischemia in the absence of obstructive coronary artery disease (MINOCA/INOCA), with coronary artery dissection or Takotsubo cardiomyopathy. This results in women being more often misdiagnosed than men.
- **Under-representation of women in clinical trials.** The enrolment of women in CVD clinical trials funded by the NHLBI was 27% between 1997 and 2006. In European CVD clinical trials, the proportion of women enrolled was even lower.¹
- **Insufficient awareness among women and physicians of sex-specific symptoms and presentation of CVD.** A study recently presented at the ESC's Acute CardioVascular Care 2021 congress showed that 41% of women wait more than 12 hours before seeking help in case of chest pain.²
- **Huge disparities in CVD morbidity and mortality across Europe.** For example, a woman in Lithuania is 13 times more likely to die from heart disease than a woman in France, while for men the gap is 9 times.³

It is time to act and address the gender gap in CVD. The ESC supports the recommendations put forward by The Lancet Commission to improve research, prevention, and treatment of CVD in women.

More specifically the **ESC calls for:**

- **Europe-wide harmonised data collection** to better understand the prevalence, diagnosis, and management of CVD in women across different geographies. The ESC has taken the initiative to evaluate prevalence and outcomes of cardiovascular conditions which are more prevalent in women

¹ Stramba Badiale M, *Women and research on cardiovascular diseases in Europe: a report from the European Heart Health Strategy (EuroHeart) project*, European Heart Journal, July 2010, Volume 31 (14)

² Martinez-Nadal G, *Heart attack diagnosis missed in women more often than in men*, Presentation at ESC Acute CardioVascular Care 2021 congress, March 2021

³ European Society of Cardiology, *Atlas of Cardiology*

Our mission: to reduce the burden of cardiovascular disease.

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by setting up **registries on pregnancy and CVD, and on peripartum cardiomyopathy** within our **EURObservational Research Programme**. In addition, to document and improve care of patients with common CVD, the ESC has initiated the **EuroHeart** project, which is based on a collaboration of national registries and which provides a robust infrastructure for undertaking both high-quality observational studies and pragmatic clinical trials. *Greater support for comprehensive and harmonised data collection in patients with CVD is needed to improve cardiovascular care in women and across regions.*

- **Identification and removal of barriers limiting women's participation in clinical trials.** Women have traditionally been under-represented in CVD clinical trials; this has limited our knowledge of the efficacy and safety of many therapies in women compared with men which, in turn, has resulted in underutilisation of both preventative and treatment interventions for CVD in women. *More involvement of women in clinical trials should urgently be promoted; research design and protocols should better address sex-specific aspects and outcomes.*

- **Greater investment in research addressing women cardiovascular health.** Better understanding of cardiovascular risk in women is essential to identify those at higher risk early and ensure that they are taken in charge adequately. *The new EU Framework Programme for Research, Horizon Europe, should support investment in research focusing on women cardiovascular health, including maternal health, leading to better prevention and care.*

- **Support for awareness-raising activities** targeting the public and, specifically, women to *ensure that risk factors and symptoms of CVD in women are recognised and reported.*

- **Specific educational activities for healthcare professionals** to ensure they are better equipped to assess risk and identify signs and symptoms of CVD in women, with the aim to prevent the current underutilisation of guidelines recommendations in female patients. *The absence of sex-specific recommendations does not justify the underuse of existing prevention and treatment strategies in women with CVD.*

- **Increase the number of women in the cardiology profession.** Gender inequality does not just affect patients, but also remains a significant problem within the cardiology profession. Women make up the majority of medical graduates in many countries, but they are under-represented in cardiology and nearly absent in senior/leadership positions. *As diversification of leadership promotes innovation and advancement in patient care, research, and health care delivery, changing the culture in cardiology should be a priority.*

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