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STRONG WOMEN

7 ways to reduce your risk of stroke (no matter how old you are), according to cardiologists

BY LAUREN GEALL 21 HOURS AGO

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Contrary to popular belief, women have a higher lifetime risk of stroke, with data suggesting one in five women will have a stroke in their lifetimes. But women's strokes often manifest differently and can be triggered by a number of unique risk factors. Here, cardiologists explain what we can do to reduce our risk.

How much do you know about strokes? You might be aware of the symptoms or how important it is to get help quickly (the NHS's Act FAST campaign has been raising awareness on this point), but many remain largely unaware of what a stroke is and the factors that play into one.

That's a problem, because strokes are more complex than we like to think. Yes, age plays a role (over 70% of strokes occur in people over the age of 65), but there are so many other factors that can increase your risk, including hormonal events like pregnancy and menopause. The lifetime risk of stroke is also higher in women (partly due to our longer life expectancy), and roughly one in five women will experience a stroke during their lifetime.

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But this does not mean that some people are destined to have a stroke or that it's a game of luck. Our risk increases as we age, but there are steps we can all implement to take care of our health and reduce our risk of stroke – you just need to know where to start.

To give you the tools you need to do just that, we asked cardiologists to explain a bit more about why women have a higher lifetime risk of stroke, and the simple steps you can take to keep your risk as low as possible.

What is a stroke?

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Before we get into it, you'll need to understand what's happening in the body when someone has a stroke. A stroke is something that occurs in the brain (which is why the symptoms tend to be neurological) but is usually caused by poor cardiovascular health.

"A stroke happens when the blood supply to part of your brain is interrupted," explains Dr Gosia Wamil, consultant cardiologist at Mayo Clinic Healthcare in London. "It's a sudden cut-off of oxygen and nutrients to that part of the brain which means the brain cells start to die."

Dr Wamil explains that there are two types of stroke. The first most common is an ischaemic stroke. This type of stroke makes up about 85% of all cases and is caused by a blockage. "The blockage can be from a blood clot, a piece of plaque breaking off from an artery or just a gradual narrowing of the arteries due to atherosclerosis," she explains.

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The second type of stroke, which is much less common but typically more severe, is a haemorrhagic stroke. These types of stroke occur when a blood vessel in the brain bursts, leading to bleeding in or around the brain. It's typically caused by very high blood pressure, aneurysms or trauma.

Typically, when we talk about reducing stroke-related risk factors, we're talking about ischaemic strokes, as these are the strokes most commonly associated with lifestyle factors within our control. However, changes that relate to the cardiovascular system may also help to reduce your risk of a haemorrhagic stroke caused by very high blood pressure.

Why are women more likely to die of a stroke than men?

At most ages, men have a higher risk of stroke than women. But a woman's risk of a stroke increases significantly as she ages, particularly after menopause.

More women also die of strokes than men – so why is this? As with most health conditions, it's complicated.

Dr Oliver Segal is a consultant cardiologist and electrophysiologist at The Harley Street Clinic, part of HCA Healthcare UK. He explains that there are numerous reasons why women make up a higher percentage of stroke mortality metrics.

"Women tend to have strokes later in life when they're often more physically vulnerable," he explains. "A study published in the National Institutes of Health journal *PMC* shows that strokes in older women are frequently more severe."

Medical misogyny also plays a role here. As with heart attacks, women tend to display different symptoms to men when having a stroke, and because women have historically been underrepresented in medical trials, stroke research hasn't always captured the different symptoms women may present, which can affect care.

"Women are more likely to experience non-traditional symptoms such as fatigue, confusion or dizziness, which may delay diagnosis," Dr Segal says. "Time is critical with stroke, so any delay can worsen outcomes. After a stroke, women are also less likely to access intensive rehabilitation or have strong support networks, both of which are key to recovery."

> "Medical misogyny also plays a role here"

Our physiology also plays a role, Dr Wamil explains: "Women are more likely to have certain conditions like atrial fibrillation, which is an irregular heartbeat that can dramatically increase stroke risk. In fact, the Framingham Heart Study showed that women with atrial fibrillation are at an even higher risk of stroke than men with the same condition."

And finally, hormonal factors can also play a role. Our risk of stroke increases when we're taking hormonal contraceptives or have gone through menopause – partly due to fluctuating levels of the sex hormone oestrogen.

"Oestrogen is a hormone that can protect the blood vessels when levels are balanced, but in some situations, it can increase the risk of stroke," Dr Wamil says. "For example, birth control pills that contain oestrogen can slightly increase the risk of blood clots, especially in women who smoke or have high blood pressure."

Pregnancy is also a risk factor to be aware of here, Dr Wamil adds. "Pregnancy changes your body in so many ways: it's what we call a hypercoagulable state, which means your blood is more likely to clot. This is actually a protective mechanism to prevent too much bleeding in childbirth, but it can also increase your stroke risk."

She continues: "Conditions like pre-eclampsia and eclampsia – which are characterised by high blood pressure and, in the case of eclampsia, seizures – are also particularly dangerous. And the first six weeks after giving birth, the postpartum period, is a high-risk time for stroke."

How to reduce your risk of stroke, no matter your age or life stage

1. Eat a heart-healthy diet

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The age-old saying of 'you are what you eat' rings true here – prioritising healthy, nutritious foods that support your heart can make a big difference to your stroke risk.

A particularly good style of eating to consider is the Mediterranean diet, Dr Wamil says. "Rich in fruits, vegetables, whole grains, nuts and healthy fats, the PREDIMED trial found that this diet reduced cardiovascular events, including strokes."

One of the main reasons why the Mediterranean diet is so good for reducing stroke risk is that it emphasises the consumption of healthy fats while reducing intake of saturated and trans fats. Saturated and trans fats can increase the 'bad' LDL cholesterol in your blood which can cause fatty material to build up in your artery walls, increasing blood pressure, while the healthy fats increase 'good' HDL cholesterol, which helps to remove other forms of cholesterol from the blood stream and keep your arteries clear.

If you don't want to stick to a strict Mediterranean diet, you can start by upping your intake of healthy fats (found in olive oil, fatty fish and nuts and seeds) and cutting out the saturated fats most often found in ultra-processed, hyper-palatable foods.

2. Move more

Good blood flow is crucial for reducing your risk of stroke, and a simple way to get your blood pumping (aka, improve circulation) is regular exercise.

The NHS recommends aiming for at least 150 minutes of moderate exercise per week, and that's a good number to aim for when it comes to reducing your stroke risk, Dr Wamil says. And you don't need to head out for a run every day to meet this goal – going on a brisk 30-minute walk (one that gets your heart rate elevated) five days a week will do it.

3. Be aware of individual risk factors

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Certain health conditions and medications can increase your risk of stroke, making it even more important that you take steps to reduce your risk in other areas. Being aware of these individual risk factors so you can take action is crucial.

For example, Dr Segal explains, not only can menopause reduce your levels of oestrogen (which, as we've already explained, can have a protective effect on your blood vessels), but metabolic changes can also heighten the impact of other risk factors.

"Declining oestrogen levels can worsen cholesterol levels and lead to increased weight gain, all of which can increase stroke risk," he says. "Health conditions such as diabetes, high cholesterol or atrial fibrillation can also increase your risk, so work with your doctor to keep them under control."

As with hormonal contraception, it's important to be aware that hormone replacement therapy (HRT) can also increase your risk of stroke, adds Dr Wamil. "Large studies like the Women's Health Initiative (WHI) have shown that HRT can slightly increase the risk of stroke, especially when started later in life," she says. "If you're considering HRT, have an honest discussion with your doctor about your stroke risk – it's not a one-size-fits-all decision, and for some women, the benefits may outweigh the risks."

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The same goes for hormonal contraception, Dr Wamil adds. While hormonal contraception can increase your risk of stroke, many women can take hormonal contraception without any issues – you just need to be aware of any additional risk factors you have on top of taking the medication and adjust your lifestyle where necessary.

"If you are using hormonal contraceptives, choose the lowest effective dose for the shortest time possible and avoid smoking – smoking plus oestrogen is a risky combination," Dr Wamil recommends. "If you experience migraines with aura – a type of migraine that's more common in women and linked to a higher risk of stroke, particularly if you're a smoker or on hormonal contraceptives – be cautious with any added stroke risks. Avoid smoking, keep your blood pressure in check and consider non-hormonal contraceptives."

4. Keep your stress under control

Uncontrolled stress can wreak havoc on your health, so you might not be surprised to learn that it can also increase your risk of stroke.

"When you're stressed, your body releases hormones such as cortisol, which can raise your blood pressure, make your heart beat faster and even cause inflammation in your blood vessels," Dr Wamil explains. "Over time, this can damage your arteries and make them more likely to develop clots."

It's worth noting that stress can also lead to unhealthy coping mechanisms, which can also increase your risk of stroke, such as poor diet, smoking or a sedentary lifestyle.

What works to decrease your stress levels will depend on you as an individual, but it's a good idea to have a 'toolkit' of coping mechanisms you can use. This can include things like mindfulness, grounding exercises and meditation, but may also look like spending time with friends or family, watching your favourite TV show or going for a walk around the park.

5. Monitor your blood pressure

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Keeping an eye on your blood pressure and making sure it stays in a healthy range is the most valuable thing you can do when it comes to reducing your risk of stroke.

"High blood pressure is the most important modifiable risk factor for stroke," Dr Wamil says. "The SPRINT trial showed that keeping systolic blood pressure below

120 mmHg can significantly lower stroke risk."

Because high blood pressure rarely produces symptoms, getting your blood pressure measured regularly is the only way to ensure yours is in a healthy range. If you're under 65, relatively fit and eat a nutritious, balanced diet (at least most of the time), it's more likely than not that your blood pressure is OK. But it's always a good idea to check in if it's been a while.

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If you're over 40, plenty of pharmacies across the UK offer free blood pressure checks. You can also get your blood pressure checked by your GP or buy an at-home cuff to measure your blood pressure independently.

There are even wearables now – like the Hilo Band – that measure your blood pressure 24/7 (although this probably isn't worthwhile unless you've been diagnosed with high blood pressure previously).

6. Quit smoking

Smoking is one of the most preventable causes of stroke, with evidence emerging that vaping could also increase the risk.

The good news is that smoking doesn't cause permanent damage from a stroke perspective (although it has other long-term effects); according to Dr Wamil, the risk of stroke decreases significantly within five years of quitting smoking.

7. Limit alcohol intake

Previous studies suggested that one drink a day could reduce the risk of an ischaemic stroke, but this has since been disproven.

However, having the odd glass of wine isn't going to make a massive difference to your risk of stroke. Instead, it's heavy drinking that can create real problems. That includes regularly drinking over recommended limits (more than 14 units per week) or binge drinking on a semi-regular basis.

Both of these activities can lead to an increase in your blood pressure, potentially trigger atrial fibrillation and lead to the formation of blood clots.

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