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In validating rare diagnosis of SCAD, AHA heals hearts

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It's American Heart Month. For those of us who have had a heart attack caused by Spontaneous Coronary Artery Dissection (SCAD), the recent American Heart Association's Scientific Statement on acute myocardial infarction (AMI) in Women is a welcome validation. SCAD is number 5 of the top 10 "things to know" about AMI.

A joyful reaction to this news may sound odd. Yet many of us have faced years of misdiagnosis. We don't have risk factors or a history of heart disease, and our average age is 42. Some of us aren't even sure if we are cardiovascular patients -- however, it's a fact our arteries split, without warning, and caused a heart attack. So it is uplifting and healing to see the AHA communicate SCAD as the urgent medical problem it is, and know that more clinicians will take our heart attacks more seriously.

Why is the AHA statement specifically important to SCAD patients?

- For women in particular, acknowledgement of SCAD opens the Emergency Room door to appropriate care – even if you are a younger female without atherosclerotic risk factors. The statement says clearly that SCAD patients may present with "unstable angina, MI, ventricular arrhythmias, and sudden cardiac death." Gas and nerves should no longer be the go-to diagnoses for younger women presenting with cardiac symptoms.
- The AHA statement also emphasizes that assessing and diagnosing women as uniquely female
 patients will lead to "the right type of treatments," which is particularly important in the case
 of SCAD, since stents may worsen a dissection that might heal on its own with medication
 therapies and cardiac rehab.
- From an emotional standpoint, making the top 5 is healing. It is affirming. It relieves the collective pain from years of dismissive treatment, the remarks like "Huh, never heard of it," or, "Well, it wasn't a heart attack then," and the loss of self while we navigated recovery. Being #5 shows we were right. It was our hearts after all, not "just a torn artery."

As co-founder and chairperson of SCAD Alliance, a nonprofit advocacy organization, I appreciate the AHA writing committee's clarification of the unique needs of women in cardiovascular research, diagnosis and treatment.

Raising the bar in these areas for women's heart health ultimately fine-tunes the knowledge base for male cardiac patients as well. For example, in the case of SCAD, presenting with heart attack symptoms in the absence of atherosclerotic disease won't seem unusual anymore – for a man or woman.

As American Heart Month 2016 draws to a close, we in the SCAD community have renewed energy in our work to stop SCAD and save hearts through improved diagnosis and care.

Katherine Leon is co-founder of SCAD Alliance, a nonprofit devoted to improving diagnosis, care, and outcomes of Spontaneous Coronary Artery Dissection (SCAD), an under-diagnosed cause of heart attack and sudden death. Katherine survived a SCAD heart attack and emergency double bypass surgery in 2003 after the birth of her second son. The ordeal marked a new beginning for her as an advocate for patient empowerment, women with heart disease, and her fellow SCAD patients. Learn about SCAD and access support at www.scadalliance.org/resources.