GETTING TO THE HEART OF THE MATTER
women and heart disease
Heart disease is the number one killer of Australian women. Only one in three women know this. Previously thought of as a ‘man’s disease,’ advances in research have shone a spotlight on the serious threat heart disease poses to women.

In Australia, 90% of women have at least one risk factor for heart disease, and over half have at least two. Smoking is a dangerous risk factor, and is of great concern as increasing numbers of young women are starting to smoke.

High blood pressure, high cholesterol and high blood sugar levels are all damaging to the heart, but in most people these risk factors cause no symptoms. Knowing your numbers helps you assess your personal risk and enables you to take action to reduce that risk.

For 60% of women with heart disease, their first and only sign is a sudden heart attack. Half of these women will die before they reach hospital.

Women and men experience heart attacks differently. Women are less likely than men to have ‘typical’ chest pain. In fact, almost half of women have no pain at all, with fatigue, difficulty breathing or sleep disturbance as the only warning signs.

This booklet is designed to give you more information about women and heart disease to help you take control of your own heart health.

The information in the booklet is also relevant for men and I would encourage you to share it with all those you know and care about.

Dr Cathie Forster
Cardiologist

This booklet is dedicated to the important women in our lives. Our mothers, grandmothers, wives, daughters, aunts, nieces and friends who all need to listen to their hearts.
Your heart beats around 60 - 100 times a minute, pumping blood and oxygen throughout your entire body. From stress to salt intake, the choices you make every day can affect your heart health in significant ways. This booklet is designed to help you learn how to protect it.

Contents

Are you at risk of heart disease? ........2
Take charge of your heart health ......4
Isn’t heart disease mainly a men’s health problem? ...............4
Reducing your risk ......................5
  Be smoke-free ..........................5
  Enjoy healthy eating ..................5
  Be active every day ...................8
Achieve and maintain a healthy body weight ..........................8
Manage high blood pressure .................9
Manage high blood cholesterol ..............10
If you have diabetes, manage your condition ..................11
Depression and social isolation ........11

Liza Kerr Stern ..........................12
The role of hormones ..................13
Oral contraception ......................13
Pregnancy ..................................13
Jane Nolan ...............................14
Recognising a heart attack ..............16
Taking care of yourself after a diagnosis of a heart disease ..........17
The Heart Foundation’s commitment to women and heart disease .........18
Go Red for Women ........................18
About us ....................................19
  Health Information Service ..........19
  Heart Foundation website ..........19
  Heart Foundation Tick ..............19
Are you at risk of heart disease? What you find out in the next few minutes could save your life. Take the quiz, check your heart health score and see what action you need to take.

Do you currently smoke?
1. No
2. Not now, but used to smoke
3. Only socially about once or twice a week
4. Yes

What age range are you?
1. Under 30 years
2. 30 - 44 years
3. 45 - 60 years
4. Over 60 years

How many servings of vegetables (including fresh, frozen and tinned) do you eat each day?
1. 5 or more servings
2. 3 or 4 servings
3. 1 or 2 servings
4. None, I don’t eat vegetables

How many servings of fruit (including fresh, frozen and tinned) do you eat each day?
1. 3 or more servings
2. 2 servings
3. 1 serving
4. None, I don’t eat fruit

In a typical week, on how many days would you do moderate or vigorous physical activity for at least 30 minutes?
1. Every day
2. 4 or 5 days a week
3. 2 or 3 days a week
4. No more than once a week

How often do you eat deep fried or fatty foods?
1. Never
2. Occasionally (no more than once a week)
3. Now and again (2 or 3 times a week)
4. Most days

Have you been told by a doctor you have high cholesterol?
1. No
2. I don’t know
3. Yes, but more than 5 years ago
4. Yes

Are you on any medicines to treat high blood pressure, high cholesterol, diabetes or heart disease?
1. No
2. Not now, but have been in the past
3. Yes, have started in the past year
4. Yes, have been on medication for more than a year
Have you been told by a doctor you have high blood pressure?
1. No
2. I don’t know
3. Yes, but more than 5 years ago
4. Yes

Does anyone in your family have heart disease or had a heart attack?
1. No
2. Yes, distant relative
3. Yes, close relative (e.g. uncle, aunt, cousin)
4. Yes, someone in my immediate family (e.g. mother, father, brother, sister, grandparent)

Have you spoken to your GP or other health professional about your heart health?
1. Yes
2. Yes, but more than 2 years ago
3. Yes, but more than 5 years ago
4. Never

Have you had a heart attack or angina?
1. No
2. Yes, but more than 5 years ago
3. Yes, 3 - 5 years ago
4. Yes, within the past 3 years

Add up the numbers next to each answer and put your total score here

Your score

12 – 20
You are managing your heart health well and doing many of the right things to minimise your heart disease risk. Keep up the good work!

21 – 30
You have a few risks of heart disease. If you have family history, are over 45 or haven’t spoken to your GP recently, book in a time to get a heart health check.

31 – 40
You have some risk factors for heart disease which need to be managed. There is no single cause of heart disease, but having multiple risk factors may increase your chance of developing it. If you aren’t already talking to your GP about your personal risks, why not book in a time to get a heart health check today.

41 – 48
You have significant risk of heart disease and may already be living with the disease. Check back on the questions where you logged a high number, and identify what changes you might be able to make to your lifestyle to improve your heart health. See your GP regularly to manage your heart disease risks.
The good news is that heart disease* is largely preventable and your risk can be greatly reduced by leading a healthy lifestyle.

Risk factors for heart disease are:

• smoking
• high blood cholesterol
• physical inactivity
• poorly controlled diabetes
• high blood pressure
• being overweight
• harmful use of alcohol
• depression, social isolation and lack of social support.

Increasing age, having a family history of early death from heart disease (i.e. in a first degree relative younger than 60 years old) or being postmenopausal also increase the risk of developing heart disease.

The more risk factors you have, the greater your risk. Importantly, smoking, poorly controlled diabetes and some blood cholesterol patterns are even more potent risk factors for heart disease in women than they are in men.

Isn’t heart disease mainly a men’s health problem?

Heart disease is the single leading cause of death for both men and women in Australia.

• On average, heart disease kills 24* Australian women per day
• More than 8,700* women died in 2013 from heart disease
• Australian women are three times more likely to die of heart disease than breast cancer.

* the statistics are from Australian Bureau of Statistics, 2013, Causes of Death.

* In this booklet the term ‘heart disease’ refers to heart problems from narrowed or blocked coronary arteries and includes heart attack and angina.
Reducing your risk

Be smoke-free

Today in Australia 1 in 6* women smoke. Smoking is a major risk factor for heart disease. It increases the risks of heart attack and stroke. It affects the arteries that supply blood to the heart and other parts of the body. Smoking also reduces the amount of oxygen in the blood and breathing other people’s smoke (second-hand smoke) is also harmful.


If you smoke, it is never too late to benefit from giving up. Quitting can be incredibly difficult, but with ongoing determination and support you can get there in the end.

Here are some tips to help you through:

- Set a date for quitting and begin to change habits. Learn how to handle stress and urges to smoke.
- Don’t give up. Many people slip up after they have quit and start smoking again. Don’t see this as a failure. Learn from this and try quitting again.
- Consider nicotine replacement products (nicotine gums, patches or lozenges), or bupropion tablets, and discuss with your GP or pharmacist.

Enjoy healthy eating

Healthy eating and drinking is a central part of looking after your heart and achieving or maintaining a healthy weight. To reduce your risk of heart disease, it’s particularly important to enjoy a diet low in unhealthy saturated fat, trans fat and salt.

Limit your salt intake

Australian adults are eating 3.2 kg of salt each year. That’s over three times more than we need. Children also eat over three times more than they need – an alarming 2.2kg each year.

Research suggests that too much salt is linked to high blood pressure and an increased risk of heart disease. If you already have high blood pressure, eating too much salt may further increase your blood pressure.

Healthy tip:
Call the Quitline on 13 78 48 for more information and advice.
However, salt is found in almost every food we eat, but the amount present in different foods varies a great deal. Most of the salt we eat comes from processed foods (e.g. soy sauce, processed meats, canned soups, stock cubes). It also comes from the salt we add at the table or in cooking. By reducing Australians’ salt intake by just 3g per day, we could save up to 6,000 lives every year from cardiovascular disease.

Fresh fruits and vegetables

Fruit and vegetables are loaded with vitamins and minerals, fibre and other beneficial components. It is important that they are included as part of your daily diet in order to stay healthy. View the diagram on the next page to see how much of your diet should include fruit and vegetables.

<table>
<thead>
<tr>
<th>Healthy tip:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Women should eat at least 2 serves of fruit each day and 5 serves of vegetables*</td>
</tr>
</tbody>
</table>

1 serve of fruit = 1 medium piece (e.g. apple), 2 small pieces (e.g. apricots) or 1 cup of chopped or canned fruit

1 serve of veggies = ½ cup of cooked vegetables or legumes, 1 medium potato or 1 cup of salad vegetables.

* For women who are breastfeeding this increases to 7 1/2 serves

Sugary and alcoholic drinks

Consumption of sugar sweetened beverages, such as soft drinks, energy drinks, fruit drinks and sports drinks, is associated with a range of serious health issues including weight gain and obesity, which in turn are risk factors for diabetes, cardiovascular disease and cancer. Wherever possible you should choose mainly water to drink.

- A 600ml sugar-sweetened soft drink contains about 16 packs/ teaspoons of sugar.
- Based on US estimates, consuming one can of soft drink per day could lead to a 6.75kg weight gain in one year.

For further information visit rethinksugarydrink.org.au.

Alcohol should be consumed in moderation with no more than two standard drinks a day. A standard drink is equal to 30ml of spirits, 100ml of wine or a can of mid strength beer. It’s best to aim for 1-2 alcohol free days per week.
Australian Guide to Healthy Eating

Enjoy a wide variety of nutritious foods from these five food groups every day.
Drink plenty of water.

- **Grain (cereal) foods, mostly wholegrain and/or high cereal fibre varieties**
- **Vegetables and legumes/beans**
- **Lean meats and poultry, fish, eggs, tofu, nuts and seeds, and legumes/beans**
- **Milk, yoghurt, cheese and/or alternatives, mostly reduced fat**
- **Fruit**

For a range of tips for eating well visit: www.eatforhealth.gov.au/eating-well/tips-eating-well

For healthy eating calculators visit: www.eatforhealth.gov.au/eat-health-calculators
Be active every day

Like all muscles in the body, the heart needs to be exercised to stay healthy.

Through regular aerobic activity (like running, walking, pump classes and skipping), the heart circulates oxygen rich blood throughout body’s network of arteries and veins. When we are overweight, the heart needs to work harder to pump blood further. This extra load is one of the ways that blood pressure is increased.

More than one in two adult Australians do not participate in the recommended amounts of physical activity. This lack of activity is a significant risk factor for women.

Physical activity helps:

- to increase the size of the heart arteries, thus bringing more blood and oxygen to the heart muscle.
- to lower cholesterol, reduces the likelihood of diabetes, and has positive psychological effects.
- helps maintain or lower blood pressure levels to a healthy level.

Physical activity like regular walking for at least 30 minutes on all or most days of the week, can reduce your risk of heart disease by as much as half. It all depends on your walking pace which should be brisk enough to still chat with a friend without being breathless.

Swimming, cycling and active gardening are also very beneficial, preferably performed for at least 10 minutes at a time for a total of 30 minutes on most days.

Joining a Heart Foundation Walking group provides ongoing motivation to keep healthy, fights depression and anxiety and keeps you connected with your community. Visit heartfoundation.org.au/walking to find your local walking group.

Other types of physical activity such as yoga or pilates also help to keep the body supple and promote relaxation which can lower blood pressure.

Achieve and maintain a healthy body weight

Being overweight is a risk factor for heart disease and diabetes and also contributes to high blood pressure. Waist circumference is considered to be a predictor of heart disease with the risk increasing if a woman’s waist measurement is 80cm or greater (for men it’s 94cm or greater).

Rates of overweight and obesity are rising in Australia and research suggests that obesity has now overtaken smoking as the largest single preventable cause of death and disease.
Whilst most Australians are aware that being overweight is bad for their health, many are in denial. It seems that as being overweight becomes more common people think that carrying extra kilos is not a threat to their health.

To achieve a healthy body weight, balance the energy (kilojoules) coming into your body through food and drinks with the energy (kilojoules) being used up by your body through regular physical activity.

To find out your ideal energy intake visit 8700.com.au.

Belly fat is dangerous because it surrounds organs like your heart, kidneys and liver. It releases chemicals which cause internal inflammation that can contribute to blockages in the arteries of your heart.

Manage high blood pressure

High blood pressure is common in Australian women, especially after menopause. 26% of Australian women aged 35 years and over have high blood pressure. However, two out of three of these women are unaware that they have high blood pressure. High blood pressure places extra strain on the heart and can speed up the process of atherosclerosis and the development of heart disease and stroke.

If your blood pressure is high, we recommend that you maintain a healthy weight, be physically active, reduce salt intake, limit alcohol intake to one drink or less daily and follow your GP’s advice. Medicine is often required to manage high blood pressure.


Some general healthy eating and activity tips include:

- Eat a variety of foods including vegetables, wholegrains, lean meats, oily fish, fruit, low and reduced fat diary.
- Enjoy healthy snacks like raw vegetables with hummus, fresh fruit, plain unsalted nuts.
- Limit sugary, fatty and salty snack foods such as crisps, cakes, pastries, biscuits, lollies and chocolate.
- Choose mainly water to drink - limit sugary drinks such as soft drinks, fruit juice drinks and cordials. If you drink alcohol, have no more than two standard drinks per day.
- Aim for 30 minutes of activity on most days of the week which can include, three shorter bursts of ten minutes.
Manage high blood cholesterol

Women often have lower blood cholesterol levels than men for much of their lives, but tend to catch up in their sixties, after menopause.

There are two main types of cholesterol in the blood: low density lipoprotein (LDL) cholesterol, or ‘bad’ cholesterol because it increases your risk of heart disease; and high density lipoprotein (HDL) cholesterol, or ‘good’ cholesterol because it helps protect against heart disease. Triglycerides are another type of blood fat that can increase risk of heart attack and heart disease.

Generally, the lower your levels of LDL cholesterol and triglycerides and the higher your levels of HDL cholesterol, the better. Having a low level of the good cholesterol (HDL), can be an even more potent risk for heart disease in women than in men. To improve your blood cholesterol levels, follow a healthy eating pattern that is low in saturated fats and make sure you are getting enough physical activity. Some people also need medicines to improve their cholesterol levels, and this is an important consideration if you already have, or are at higher risk of developing, heart disease.
If you have diabetes, manage your condition

Diabetes increases your risk of heart attack, angina and stroke. There are two types of diabetes.

Type 1: Previously known as insulin dependent or juvenile onset diabetes.
Type 2: Previously known as non-insulin dependent or mature onset diabetes.

If you have diabetes, it is important to manage your condition by being physically active, enjoying healthy eating and (where appropriate) reducing your weight. People with Type 1 diabetes need medication to regulate their blood sugar levels, and many people with Type 2 diabetes also need medications in addition to managing their lifestyle.

It is very important to stop smoking, reduce blood cholesterol, control blood pressure and regularly see your GP for diabetes reviews.

Depression and social isolation

It has recently been shown that people who experience depression, are socially isolated or do not have quality social support are at greater risk of developing heart disease. We also know that many people who have had a heart attack will develop depression afterwards, and this needs to be recognised and managed appropriately.

Depression can be treated effectively. See your GP or health professional if you suspect you are experiencing depression.

Call Lifeline on 13 11 14 for help on a wide range of issues including:

- Anxiety
- Depression
- Loneliness
- Abuse and trauma
- Physical or mental wellbeing
- Suicidal thoughts or attempts
- Stresses from work, family or society
- Information for friends and family.

Lifeline provides 24 hour access to crisis support, suicide prevention and mental health support services.
Liza is a fit, healthy and very active 41 year old mother of two children aged 3 years and 7 years. In September 2014, Liza suffered a massive heart attack due to a Spontaneous Coronary Artery Dissection (SCAD) which sent her into cardiac arrest. Her husband recognised the symptoms (pain, numbness of the left arm and being hot and clammy) and called an ambulance.

The paramedics arrived when Liza’s heart stopped and were able to preform CPR immediately. After 32 minutes of CPR and 7 shocks from the defibrillator they were able to finally get a heart rhythm. Statistics show that only 5 per cent of cardiac arrests outside a hospital survive the experience. If the paramedics weren’t there when Liza’s heart stopped, she probably would not have survived.

Liza was intubated at the scene and rushed to St Vincent’s Hospital in Sydney where an emergency angiogram was performed. She was diagnosed with an extensive dissection of her left anterior descending artery (LAD) from top to bottom. Three stents were placed in Liza’s LAD to try and re open the artery. She spent six weeks in hospital and a week in the Intensive Care Unit (ICU) before having a ST-Elevation Myocardial Infarction (STEMI) when being transferred to the Acute Cardio Ward. A few days before she was discharged, Liza had an Implantable Cardioverter-Defibrillator (ICD) inserted to detect any future life threatening or rapid heartbeats.

Each day Liza counts her blessings to still be alive and with her family. She was lucky enough to meet and thank the two paramedics that helped save her life at the crucial moments of her cardiac arrest.

Liza admits that she initially found it very hard to adjust to her new life but with support and time she has found ways to manage.

Spontaneous Coronary Artery Dissection (SCAD) is a rare and life threatening condition that seems to mainly effect women between the ages of 35 and 55 years of age and often just after childbirth.

Few Australian know about Spontaneous Coronary Artery Dissection (SCAD). Liza hopes that her story will raise awareness of SCAD and help educate other women in identification, prevention and management of this heart condition.
It is not clear why women tend to get heart disease at a later age than men, although it seems that the hormone oestrogen may give some protection during the reproductive years.

Hormone replacement therapy (HRT), which includes oestrogen replacement, has been used for many years for the short-term treatment of troublesome menopausal symptoms. Depending on their GP’s advice, HRT has also been used after menopause by some women who have osteoporosis.

Osteoporosis results in a reduction in bone density and strength. In this case, HRT is used to reduce the risk of a future bone fracture, but the balance between risks and benefits of the treatment in an individual must still be considered. There are also other treatments for osteoporosis which are commonly used, rather than HRT.

There has been a lot of research into the effects of HRT on the development of heart disease. Based on this research, we do not recommend that HRT is used to prevent heart disease in women.

We also do not recommend it for preventing further heart problems in women who already have heart disease.

Before commencing HRT women should discuss the risks and benefits of the therapy with their GP.

For healthy young women, oral contraceptives are usually safe. However, women who smoke while taking the contraceptive pill greatly increase their risk of heart, stroke and blood clots in the legs and lungs.

Pregnancy is often referred to as the’ ultimate stress test’ for the body. It places significant stress on the heart and circulatory system and it is estimated that a woman’s blood volume increases by 30-50% to nourish her growing baby. Labour and delivery add more stress with changes in blood flow and pressure, forcing the heart to work harder.

Women with underlying heart problems should make sure these demands are closely managed throughout their pregnancy by their health care team.

Research also suggests that women who experience gestational diabetes or hypertension (especially pre-eclampsia) may be at increased risk of heart disease later in life. These women should make sure they work with their GPs to monitor their heart disease risk factors, after the birth of their child.
Jane Nolan had a heart attack in her 50s. For two nights she felt a slight pinprick sensation in her chest and started to feel something was wrong. Jane went to her local GP but nothing was found to explain her symptoms. The pain at night returned and Jane also felt it on walking down the hallway in her home. She went back to her GP. Her ECG was fine and her blood pressure didn’t rise much either. There was nothing in her blood works, she had never had cholesterol issues and was not overweight. After two visits to the GP and a lot of tests and unanswered questions Jane’s GP called the cardiology team. The cardiologist said if Jane didn’t persist with her GP to find out what was happening to her, things might not have been the same. The only thing that showed Jane’s heart problem was a stress test and an ultrasound. She was admitted to hospital immediately. Two days later in intensive care, Jane suffered a heart attack and after the insertion of a stent she went home. A few months after her heart attack and operation things still weren’t right. Jane was air lifted to Sydney after some issues with the bare metal stent. The metal stent were replaced with a coated T Junction product to improve the performance and function of Jane’s heart. Post heart attack, Jane had cardiac rehabilitation. Some of the changes she has made include eating a healthier diet, losing weight and doing more physical activity. Now almost 12 months later, Jane can walk 6 to 8kms a day, go traveling and enjoy life with no real permanent heart damage. Jane’s advice would be to get a heart health check at your local GP. If you’re experiencing strange pains ask questions and be persistent in getting answers, it could just save your life!

Jane Nolan
women and heart disease

Jane Nolan on holiday

The cardiologist said if Jane didn’t persist with her GP to find out what was happening to her, things might not have been the same.
HEART DISEASE CLAIMS
24 female lives every day

HEART DISEASE KILLS
MORE THAN 3X AS MANY ♀ AS BREAST CANCER

90% of ♀ have at least one risk factor for heart disease

50% have two or three

go-red-for-women.org.au
Recognising a heart attack

Research has found around 40% of women will not experience chest pain. Knowing the warning signs could save your life.

If symptoms are severe, get worse, or persist for 10 minutes, call Triple Zero (000) now.

* If calling Triple zero (000) does not work on your mobile phone, try 112.

Neck
You may feel a general discomfort in your neck, or a choking or burning feeling in your throat. This discomfort may spread from your chest or shoulders to your neck.

Jaw
You may feel an ache or tightness in and around your lower jaw on one or both sides. This discomfort can spread from your chest to your jaw.

Shoulder(s)
You may experience a general ache, heaviness or pressure around one or both of your shoulders. This discomfort may spread from your chest to your shoulder(s).

Back
You may feel a dull ache in between your shoulder blades. This discomfort can spread from your chest to your back.

Arms
You may feel pain, discomfort, heaviness or uselessness in one or both arms. This may also feel like numbness or tingling. This discomfort may spread from your chest to your arm(s).

Chest
You may feel pain, heaviness, tightness pressure or a crushing sensation in the centre of your chest. This discomfort may be mild and make you feel generally unwell.

You may also feel:

Nauseous.
You may feel nauseous or generally unwell.

Dizzy.
You may feel dizzy or light-headed.

A cold sweat.
You may break out in a cold sweat.

Short of breath.
You may find it difficult to breathe or take a deep breath due to a tight or constricted feeling in your chest.

For more information call our Health Information Service on 1300 36 27 87 or visit www.heartattackfacts.org.au
Taking care of yourself after a diagnosis of heart disease

Heart disease is a lifelong condition and needs ongoing management for patients to live longer and healthier lives. When you are diagnosed with heart disease it is important to actively manage your condition with your health care practitioners. There are many positive, effective things you can do to stay healthy.

**Cardiac rehabilitation** is the first, critical step to get you back on track after a cardiac event. It helps people with heart disease return to a full, active and satisfying life as quickly as possible as well as helping to prevent further heart problems.

Cardiac rehabilitation is a supervised program lasting between 6 and 10 weeks. Supporting people with a range of heart conditions, the programs include physical activity, health education, counselling and self management skills.

Research shows that cardiac rehabilitation saves lives and leads to better patient outcomes. However women are less likely to attend and complete cardiac rehabilitation programs.

To find your nearest location for a cardiac rehabilitation program visit [www.heartfoundation.org.au](http://www.heartfoundation.org.au) or call our Health Information Service on 1300 36 27 87.

When you are diagnosed with heart disease it is important to actively manage your condition with your health care practitioners.
In Australia, we lose an incredible 8,700* women of all ages to heart disease in just one year. And the vast majority have no idea they are even at risk.

The problem is really clear: not enough women know the risks of heart disease. They don’t know heart disease is Australia’s number one killer of women. They don’t know what to look out for or what to ask their GPs about. And when they feel classic symptoms like breathlessness or dizzy spells, they don’t recognise them for what they are.

Lack of awareness is unnecessarily killing Australian women, leaving devastated families in its wake.

What Australia needs is a major, substantial and wide-ranging change in the way we think about heart disease. We’ve got to get to a place where women can name the risks of heart disease as easily as they can name their children.

The Heart Foundation wants every woman who visits her GP to know what questions to ask and for research into women and heart disease to be a priority for governments and communities.

* the statistics are from Australian Bureau of Statistics, 2013, Causes of Death.
The Heart Foundation saves lives and improves health through funding world-class heart and cardiovascular research, developing guidelines and resources for health professionals, informing and providing education to the public and assisting people with heart and cardiovascular disease.

Heart disease is the leading cause of death in Australia. For more than fifty years, the Heart Foundation has been dedicated to saving lives by making a difference to the heart health of all Australians. Our purpose is to reduce premature death and suffering from heart, stroke and blood vessel disease.

As a charity, the Heart Foundation relies on donations from the community to help us continue our lifesaving research, education and health promotion work.

In NSW we have made heart disease in women a priority. We are working with communities across the state to raise awareness of heart disease and the steps women can take to reduce the risk. We are supporting health professionals

Health Information Service

Our Health Information Service is staffed by qualified health professionals. Call 1300 36 27 87 (local call cost) during business hours for information about healthy eating, physical activity, quitting smoking, managing blood pressure and cholesterol levels, heart disease, stroke, and heart surgery. Please note that this service is not an emergency, diagnostic or counselling service.

Heart Foundation website

Our website provides you with access to all our heart health information and programs, cookbooks, and guidelines for health professionals. You’ll also find details about local events and information about how you can support the Heart Foundation. Visit heartfoundation.org.au today.

The Heart Foundation Tick

One of the simplest ways to make your favourite recipes healthier is by substituting ingredients with the Heart Foundation Tick approved foods in supermarkets.

All foods with the Heart Foundation Tick have passed the most rigorous independent auditing in Australia, so you can trust they are genuinely healthier choices.

Heart Foundation Tick approved foods have been passed not only by our nutrition and promotion requirements, but also our strict standards for food safety and preparation.

For more about the Heart Foundation Tick visit heartfoundation.org.au or call 1300 36 27 87.
Heart Foundation offices in New South Wales

Sydney
Level 3, 80 William Street
Sydney NSW 2011
Tel: (02) 9219 2444

Newcastle and the Hunter
32 Brunker Road
Broadmeadow NSW 2289
Tel: (02) 4922 1547

Illawarra
Kiama Hospital and Community Health Service
Bonaira Street
Kiama NSW 2533
Tel: (02) 4232 0122

Tamworth and New England
Alliance People Solutions,
Level 1, 307 Peel Street
Tamworth NSW 2340
Tel: (02) 6766 1394