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Country: **Italy**

Titel of the project: **Differences in atrial fibrillation and stroke presentation in women and men: an education campaign**

## Project details

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Award amount: €100,000

We propose to implement an education campaign addressed to two audiences: women and general practitioners. The first will have a simple and conversational content, albeit with a strict reference to scientific evidence. The second will be more detailed, with operating proposal and usable in the daily professional activity

Optimal diagnosis and timely treatment of patients with atrial fibrillation (AF) and stroke depend on the early detection of disease. Unfortunately, both women and healthcare professionals seem to remain partially unaware that cardiovascular diseases (CVD) clinical presentation differs between the two sexes. AF is 1.5 times more frequent among men. On the other hand, since the number of women >75 years is almost double than that of men, the absolute number of individuals with AF is almost the same in the 2 sexes. AF is mainly associated with CHD in men and valvular disease and HF in women. At the time of their first ECG with AF, women are 5 to 10 years older than men and more symptomatic. Women have more episodes of paroxysmal AF, a more higher ventricular response and a major incidence of cardioembolic complications. Risk of death is 1.5 among men and 1.9 among women. Stroke in women is a major health issue that has been underestimated for a long time. Its incidence is higher in men across all ages, but this difference decreases as women age, indicating a protective role of sex hormones. Besides, more strokes occur in women because of their longer life expectancy: projections indicate that by 2050 mortality from stroke will be 30% higher in women than in men. In presence of AF, women are at increased risk of stroke, with a worse prognosis: the 1-year mortality is 16.2% in women and 11.9% in men. Women with stroke may present with a different symptom profile than men; they are less likely to report trouble with walking, balance, or dizziness. Women with stroke experience longer door-to-doctor and door-to-image intervals and are less likely to receive tissue plasminogen activator. Finally, the social impact of stroke is greater in women because they have poorer functional course after stroke with more physical and cognitive impairment, more depression, and lower quality of life. Of course, the greatest progress in the treatment of AF has been assured by reducing the risk of stroke with oral anticoagulation therapy (OAT). Unfortunately, women were virtually excluded from large intervention trials. To date, although the available evidence shows that OAT reduces the risk of stroke by 84% in females and 60% in men, women receive less OAT than men of similar age (- 54%). On behalf of the Department of Cardiovascular and Neurological Sciences of University of Cagliari, Sardinia, Italy, we propose to implement an education campaign addressed to two audiences: women and general practitioners. The first will have a simple and conversational content, albeit with a strict reference to scientific evidence. The second will be more detailed, with operating proposal and usable in the daily professional activity.

## **Audience**

### **Type**

- Healthcare professionals
- General public

### **Location**

Italy, Europe