Did you know that if you’re a woman, aside from smoking your single most lethal risk factor of having a cardiac event is high blood pressure? The reason is that women have smaller blood vessels in the heart, making them more vulnerable to high blood pressure and inflammation of the blood vessels.

The statistics are startling. High blood pressure affects one in four women, and kills significantly more women than men: 55.2% of women compared to 44.8% of hypertensive men, according to American Heart Association’s 2013 statistics. The reason is that women have smaller blood vessels and a higher tendency for diastolic dysfunction than men, making the lethal side effects of hypertension a much greater health risk.

A healthy blood pressure level is less than 120 mmHg over 80 mmHg. High blood pressure means you have a systolic blood pressure of 140 mmHg or greater, and/or a diastolic pressure of 90 mmHg or greater.

What Causes High Blood Pressure in Women?

- Pregnancy: Many women with high blood pressure deliver healthy babies (hypertension during pregnancy is called eclampsia). But pregnancy—and the increased blood volume required to nurture a growing fetus—can potentially raise blood pressure to extremely high levels. For this reason, expectant mothers also should have blood pressure readings taken routinely. Hypertension can develop rapidly in the last three months of pregnancy. When this happens, a woman may need treatment—even after delivery.

- Menopause: Normal age-related hormonal declines often cause a woman’s arteries to become less elastic and more constrictive, thus contributing to high blood pressure. On their own, these changes are reason enough to pay extra attention to your lifestyle choices that affect cardiovascular health. But the situation is further complicated by the use of hormone replacement therapy (HRT) to minimize or eliminate other symptoms of menopause, like hot flashes and night sweats.

- Metabolic Syndrome: Data from a five-year National Health and Nutrition Examination study of adults with hypertension revealed what causes hypertension in women: low HDL cholesterol levels, elevated total cholesterol levels and excess abdominal fat (waist girth of more than 35 inches). This profile is largely consistent with metabolic syndrome, a widespread asymptomatic condition that often leads to diabetes and heart disease.
High blood pressure in women—a dangerous, and often undiagnosed, condition

Plus, Women Are More Vulnerable to High Blood Pressure Induced by Medications

Another challenge for women is that they can have more complicated pharmaceutical drug reactions that can worsen high blood pressure. A prime example is the chronic use of non-steroidal anti-inflammatory drugs (NSAIDS), such as over-the-counter ibuprophen preparations taken for menstrual discomforts and pain relief. The reason is that NSAIDS can cause fluid retention, decrease kidney function, and raise blood pressure even more.

Synthetic hormone replacement therapy (HRT), such as medroxyprogesterone found in drugs like Progestin and Provera, can also intensify high blood pressure by causing blood vessels to constrict. A case in point is Helen, age 58, who came to me with severe shortness of breath—even at rest—that was limiting her quality of life. You see, her high blood pressure had been so longstanding that it was worsening her mitral valve regurgitation to the point that it had become severe, which was making her very symptomatic. Daily life had become so intolerable that she’d even consulted a cardiac surgeon who recommended she have a mitral valve replacement operation.

Being postmenopausal put Helen at greater risk of high blood pressure. But I was stumped as to why my integrated approach didn’t seem to be making a dent in the overall problem. She hadn’t responded to blood pressure medications, even with the addition of a combination of coenzyme Q10, L-Carnitine, and magnesium. Controlling her hypertension was imperative in order to take the pressure off that precarious valve.

Poring over her chart, I asked Helen to once again think very carefully about each and every medication she was taking as I reviewed the list. To my surprise, she remembered that her gynecologist had started her on synthetic progesterone a while back. That was just the lead I’d hoped for! She agreed to stop taking the progesterone, and within weeks her mitral valve regurgitation improved from severe to the mild-to-moderate range as her blood pressure stabilized. Needless to say, Helen’s fatigue, breathing difficulties, and quality of life were markedly improved as a result of a simple medication withdrawal.

What’s the Best Way to Protect Yourself from High Blood Pressure?

When it comes to high blood pressure, women need to be more mindful than men of the contributing factors, and take action to mediate them including:

- Stress
- Genetics
- Being overweight
- A high-sugar or high-salt diet
- Heavy metal toxicity
- Lack of exercise
- “Thick” blood

When you meet with your physician, it’s also important to tell him or her about all of the medications you’re
High blood pressure in women—a dangerous, and often undiagnosed, condition

taking, including any over-the-counter medications since some of them can contribute to high blood pressure.

To lower high blood pressure, folate supplementation is particularly helpful for women. Plus, a combination of diet, exercise, and the right nutritional supplements can help to lower your blood pressure naturally—here’s my complete program.

For more information, you can also get a copy of my book, HeartSense for Women.

Now it’s your turn: Have you been successful keeping your blood pressure in check?