Higher Cardiac Workload in the Upright Posture in Male versus Female Subjects

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- DYNAMIC
 - Study of hemodynamics
 - Supervised by professor Ilkka Pörsti

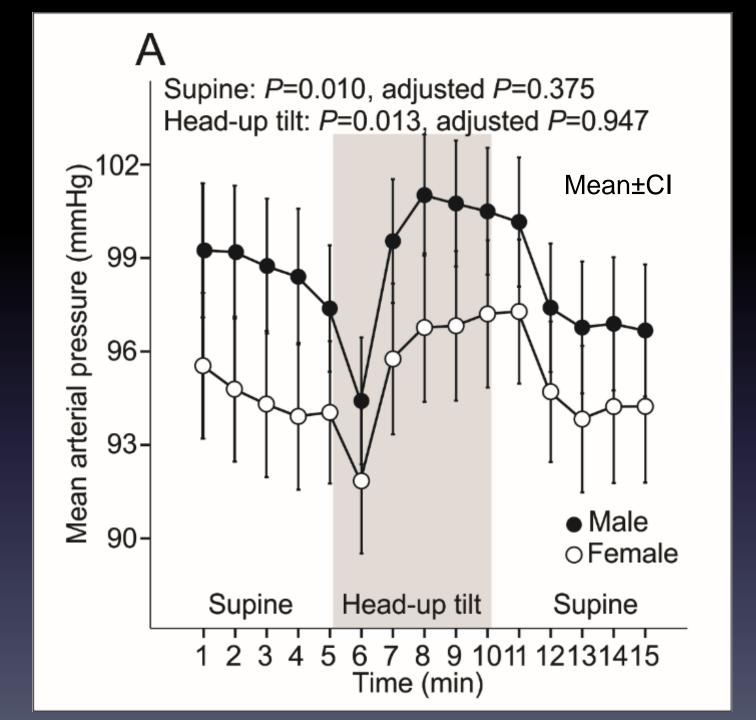
No conflicts of interests

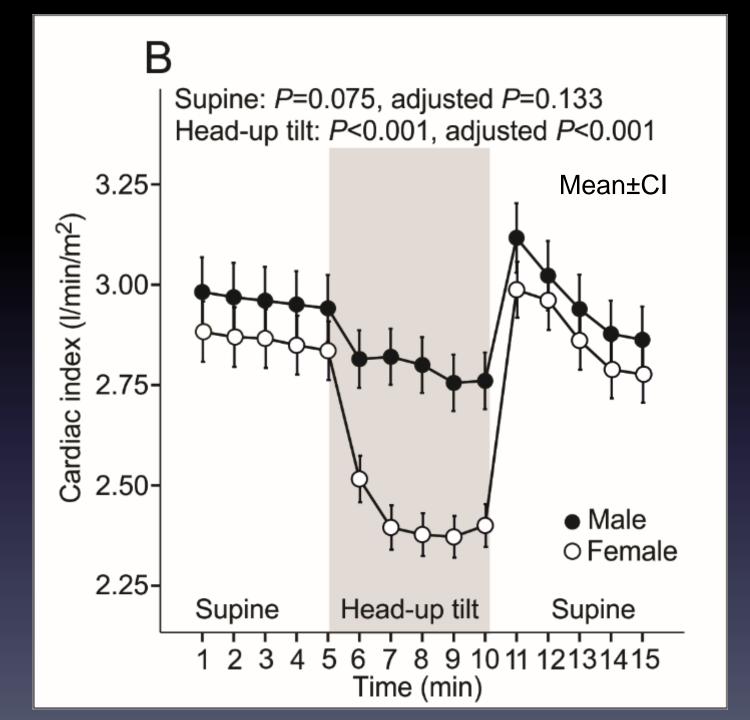
MEN AND WOMEN ARE DIFFERENT!

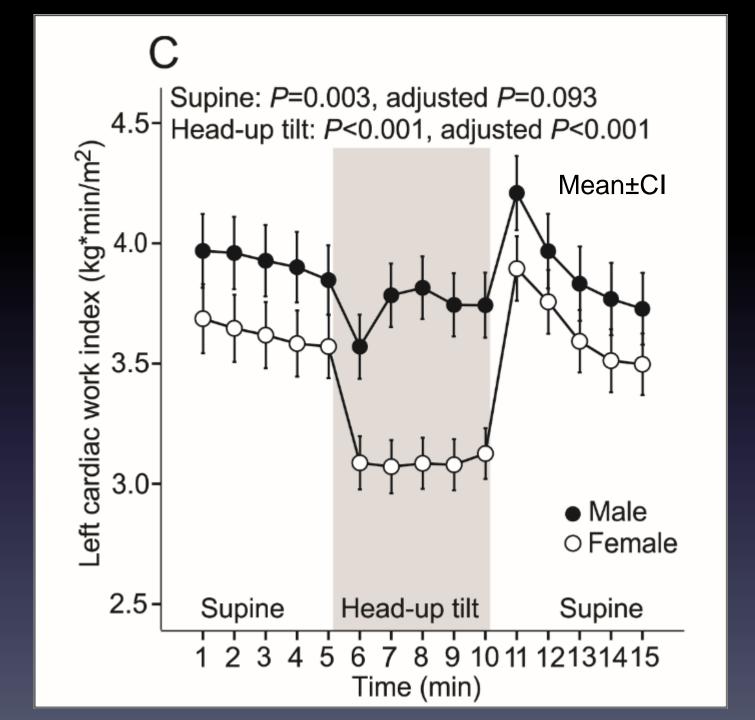
- Men and women differ
 - In the incidence and prevalence of cardiovascular diseases
 - In the mortality of cardiovascular diseases
- However, the treatment for hypertension,
 hyperlipidemias, diabetes, etc. is the same for both sexes (excluding the time of pregnancy).

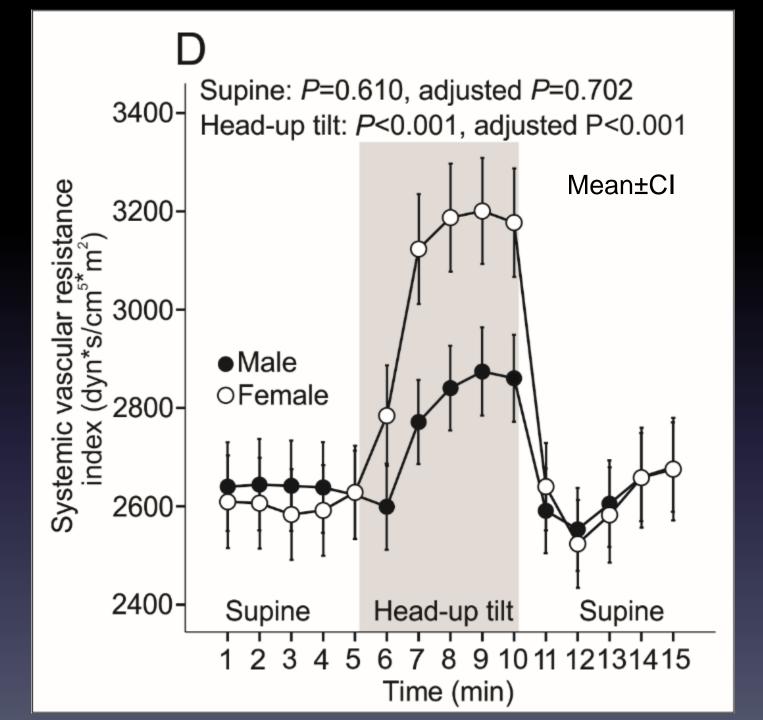
- The aim of our study was to evaluate the sexrelated differences in hemodynamics, both in the supine and the upright positions.
- In the evaluation of cardiovascular risk, the significance of upright hemodynamics may have been neglected, although the standing position is characteristic for the human race.

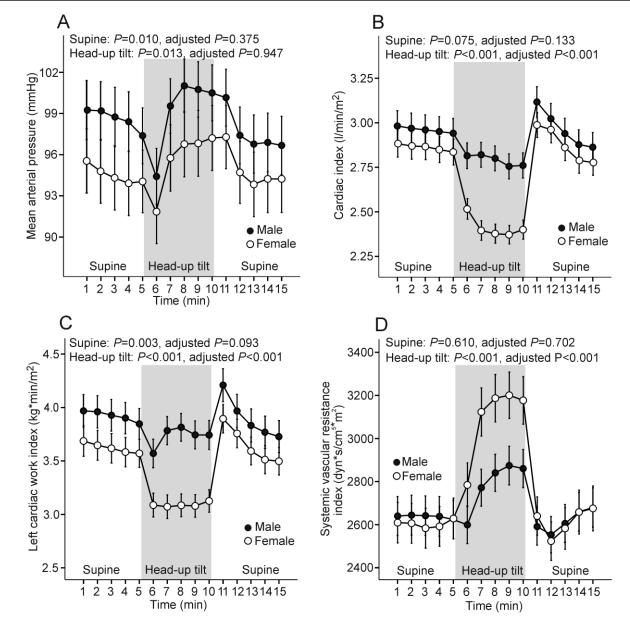
- 5 min in the supine position, 5 min in the upright position (passive head-up tilt).
- Impedance cardiography, tonometric blood pressure recordings (radial artery).
- The study population consisted of 167 men and 167 women matched in age and body mass index.
 - No medications with cardiovacular actions
 - No diabetes, arterosclerosis, heart disease











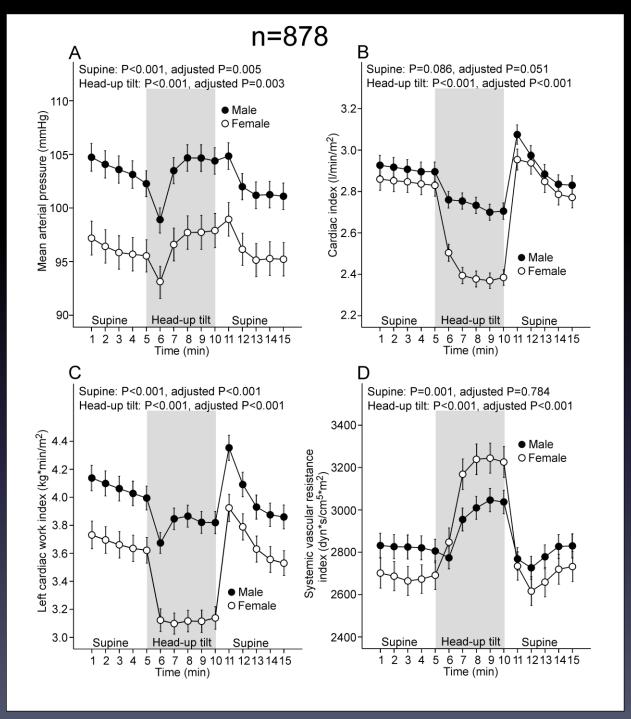
Analyses were adjusted for LDL and HDL cholesterol, triglycerides, glucose, mean arterial pressure, smoking habits, alcohol intake, and height.

Conclusion

- Men and women have differences in hemodynamics, especially in the upright position.
- In men, the upright position seems to stress the heart, while in women the hemodynamic balance is maintained more by changes in peripheral arterial resistance.
 - Could this difference be one explanation for the unequal incidence of cardiovascular diseases in men and women?

- These hemodynamic differences are not explained by the generally known cardiovascular risk factors like smoking, lipid or glucose disorders or hypertension.
- Blood pressure level is determined by just two variables:
 BP=PERIPHERAL VASCULAR RESISTANCE x CARDIAC OUTPUT
- The original study was published in *Journal of the American* Heart Association in June 2016.





Age≥ 55, without HRT

