Dangerous heart conditions often go undetected in pregnant and postpartum women even years later

National Jewish Health experts advocate for screenings to detect heart conditions that may develop in otherwise healthy women

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DENVER — Heart disease is the leading cause of death in women nationwide. It also accounts for a third of pregnancy related maternal deaths. Experts at National Jewish Health recommend screening women during and after pregnancy when they are at particularly high risk of developing dangerous heart conditions with the goal of diagnosing disease early.

"Women have different biology, risk factors and symptoms of heart disease than men, and pregnant and postpartum women in particular are going through a critical time in their lives when their heart is working overtime, and they have a lot of cardiac stress," said Minisha Kochar, MD, a cardiologist at National Jewish Health who specializes in treating women. "It's important to recognize developing issues early, yet many women and physicians confuse telltale signs of heart disease in women as normal symptoms of being pregnant or having a newborn at home."
Oftentimes, heart conditions develop in otherwise healthy, young women who may be so focused on the health of their baby that being proactive about their own heart health is not top of mind. But heart conditions that fly under the radar can become life threatening if not diagnosed in a timely manner and can also cause problems many years later.

Among these potential issues is preeclampsia, a blood pressure condition that affects about 5% of pregnancies and puts women at immediate risk of stroke and seizures while increasing their lifelong risk of heart disease by 25%. A form of heart failure known as peripartum cardiomyopathy can also develop toward the end of pregnancy and weaken the heart muscle. Researchers are learning more about spontaneous coronary artery dissection, a condition that usually develops within six months of having a baby that can result in sudden heart failure but has few, if any, symptoms.

“Education is key, which is why bridging the gap between patients and their physicians is a major focus, making both patients and physicians aware of the conditions and symptoms that may represent cardiovascular disease in women,” Dr. Kochar said. “Many patients think they’re okay unless they have severe chest pain, but I’ve had women come in having active heart attacks with something as subtle as shortness of breath, indigestion or jaw pain. They’re going to their dentists thinking they have issues with their teeth, when in fact it’s their manifestation of heart disease.”

When Christi LeClair was pregnant, her extreme fatigue and swelling were chalked up to the normal experiences of pregnancy. It wasn’t until more than two decades later that she learned these were actually warning signs that she was in heart failure.

“I just never got back to my normal self, to the point where I would ask my doctor at my annual exam, ‘When am I going to feel like I felt before I had kids,’” LeClair said.

For years, her ongoing symptoms were misdiagnosed as chronic fatigue and fibromyalgia, until she was referred to Dr. Kochar at National Jewish Health and was told her heart had been pumping far under capacity for years. She was also diagnosed with a congenital heart condition that causes her to have an abnormal heart rhythm.

“I was doing everything right, so it never even occurred to me that there could be a problem with my heart,” LeClair said. “You can’t exercise your way out of it or eat a better diet to solve it. You have to ask your primary care physician or OB/GYN directly about what you’re experiencing and have that combination of care with a cardiologist. More women need to be educated on their risks, so they don’t wait as long as I did to seek the right treatment.”

LeClair had a device implanted that improves how her heart pumps and continues to work with Dr. Kochar and a team of cardiologists at National Jewish Health to improve her condition. It’s common for women to have experiences like LeClair’s where heart disease goes undiagnosed until it’s at an advanced stage, when their disease is more difficult to treat. Dr. Kochar recognized this gap in care and the need to break down barriers to cardiac care for women.

“Being aware of the specific conditions in pregnancy is extremely important because it impacts the wellbeing of the fetus and the mom,” Dr. Kochar said. “It’s critical that women talk to their doctors about risk factors and screenings because early diagnosis is key. There are quick and painless procedures that can lead to an accurate diagnosis and effective treatment that vastly improve longevity as well as quality of life for women.”

**National Jewish Health** is the leading respiratory hospital in the nation. Founded 125 years ago as a nonprofit hospital, National Jewish Health today is the only facility in the world dedicated exclusively to groundbreaking medical research and treatment of children and adults with respiratory, cardiac, immune and related disorders. Patients and families come to National Jewish Health from around the world to receive cutting-edge, comprehensive, coordinated care. To learn more, visit the [media resources](#) page.

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We have many faculty members, from bench scientists to clinicians, who can speak on almost any aspect of respiratory, immune, cardiac and gastrointestinal disease as well as lung cancer and basic immunology.
Media Contacts

Our team is available to arrange interviews, discuss events and story ideas.

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