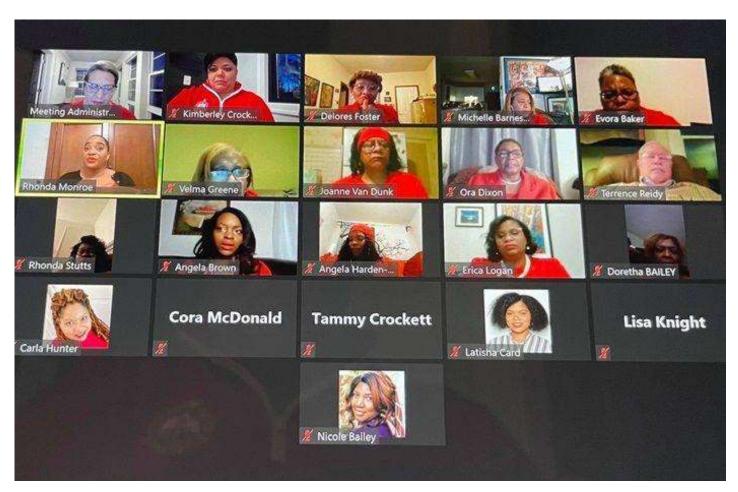
https://www.journal-news.net/journal-news/matters-of-the-heart-epac-delta-sigma-theta-sisters-stress-awareness-during-american-heart-month/article_654e883a-71f0-5748-a714-8d3ee0b67043.html

FEATURED

Matters of the Heart: EPAC Delta Sigma Theta sisters stress awareness during American Heart Month

By Jessica Wilt jmanuel@journal-news.net Feb 9, 2021



The Eastern Panhandle Alumnae Chapter of the Delta Sigma Theta met Friday with American Heart Association Heart Ambassador Rhonda Monroe virtually to stress awareness of heart-related problems in women in light of National Wear Red Day and American Heart Month.

Submitted photo

MARTINSBURG — This past Friday seemed like a normal day for most, but a sea of red during an evening Zoom call brought to light the importance of the day, the day marking National Wear Red Day to bring awareness to heart disease and cardiovascular care for women.

The Eastern Panhandle Alumnae Chapter of the Delta Sigma Theta sorority came together virtually to stress the importance of American Heart Month and listen to the story of Rhonda Monroe, a survivor of numerous heart-related issues.

"COVID-19, for us, with 2020, has taken over, and I think every conversation we're having is around COVID-19," said Michele Barnes-Russell, who chairs physical and mental health for the Eastern Panhandle chapter. "But we still have to make sure we're staying up on the other issues like heart disease, cancer."

The sorority participates in National Wear Red Day every year, partnering with the American Heart Association, especially during American Heart Month in February.

"Everyone is always asked to wear red, so this year, we did what we called Code Red. We got a call together to talk about heart disease," she said.

Barnes-Russell said the weight of Monroe's story carried heavy, the insurmountable importance that her one story highlighted. Monroe is a heart ambassador for the American Heart Association, having survived five coronary artery dissections, three heart attacks, a stroke, congestive heart failure, a defibrillator implant, a hematoma evacuation, a failed quadruple bypass surgery and much more at just 36 years old. She was misdiagnosed for a week before receiving appropriate cardiac care.

"Heart disease looks very different for us as women than it does men," Barnes-Russell said.

"There's that standard of certain clues that let you know you are having some type of heart attack or something. Ours can look very different. Those were some things she shared. She had experienced back pain. She'd just had her third child. She kept going back and forth to the hospital, and they kept sending her home. After numerous attempts, someone finally realized she was going through

cardiac arrest. When I tell you, it's amazing everything she's gone through. When she speaks, you see those scars. You can't help but be drawn. She's young. It's just amazing what we go through as women."

According to the National Heart, Lung and Blood Institute, women generally get heart disease about 10 years later than men do, but it's still the No. 1 killer in women.

"After menopause, women are more likely to get heart disease, in part because estrogen hormone levels drop," the institute says. "Women who have gone through early menopause, either naturally or because they have had a hysterectomy, are twice as likely to develop heart disease as women of the same age who have not gone through menopause. Middle age is also a time when women tend to develop other risk factors for heart disease, such as high blood pressure."

That one concept — that heart-related issues look different for women than men — said a lot, Monroe shining a light on how important it is for women to remember to take care of themselves, not just the others around them.

"We, as women, we will take care of everybody but ourselves," Barnes-Russell said. "We carry on. That's what she stated. When she first started experiencing things, she went through this whole entire checklist of things that she tried to tie it to. We do not put enough time into ourselves, but we'll make sure our kids have their appointments. But how often are we following up to ensure we are checking ourselves?

"Then throw COVID-19 into it, the stress levels it is adding to our lives. Your heart is affected by your mental stress, your physical activity, your diet. Everything can really put a lot of strain on your body, particularly your heart. She touched on a lot of things that night, and I thought it was very good."

According to the American Heart Association, signs and symptoms of heart attack include: uncomfortable pressure, squeezing, fullness or pain in the center of your chest that lasts more than a few minutes or goes away and comes back; pain or discomfort in one or both arms, the back, neck, jaw or stomach; shortness of breath with or without chest discomfort; breaking out in a cold sweat; nausea; or lightheadedness.

As with men, the most common heart attack symptom for women is chest pain or discomfort, but women are somewhat more likely than men to experience some of the other common symptoms, particularly shortness of breath, nausea/vomiting and back or jaw pain, the association said.

Barnes-Russell said, for herself in particular, the meeting stressed the need to know her numbers — BMI, weight, cholesterol and the like. She added that African-American women have higher rates of cardiovascular-related incidents than their peers. Statistics shared by the Eastern Panhandle chapter showed heart disease as the No. 1 killer among women, claiming the life of one in every three.

The hour-long discussion showcased the need for care on all levels for women, in particular, to create the routine of health mindfulness, overall health playing a large factor in heart health.

"When she was sharing her story, it was an incredible connection," Barnes-Russell said. "She shared the physical pieces, but then she went in and shared the aspect concerning the other effects, like she had been in a bad relationship. That's strain on your body. All these things we take, that we sometimes put ourselves under, that weaken us, our hearts are affected by it. It was just a realization that we, as women, need to make sure we have these mental health checks. We need to make sure we have folks we can go and talk to.

"We definitely had an opportunity to look at where we are with ourselves. Am I going to the doctor? It's easy to say and stress to everybody, but am I really doing it? When I get up in the mornings, am I making sure I'm doing things to watch what I'm eating? We have been looking for ways to incorporate self-care, because that is critical. It can't just be a one-day type conversation. We need to look at it: What am I doing on Monday? Maybe Monday is going to be Know My Numbers Day. Tuesday is going to be I'm going to concentrate on finding a heart-healthy recipe. All we're doing is matching up with what the American Heart Association has been telling us all along to do. Break it down, so it's not a one-day event; it is an everyday something that you do."

She said the breakdown is Mindful Monday, Tasteful Tuesday, Wellness Wednesday, Treat Yourself Thursday, Follow Friday and Selfie Saturday — ways to inspire others to start their journey to better health. Sunday is all about self-care and setting the tone for the week to maintain the momentum in care.

Barnes-Russell also stressed the need for having someone to talk to, that person to just have personal interaction with as a means of healthy living, an important component especially amid the COVID-19 pandemic.

"There's nothing like being in a place where folks can be together," she said. "The virtual stuff, there's nothing like that personal."

To learn more about Monroe and see the full conversation with the Delta Sigma Theta's Eastern Panhandle Chapter, visit the group's YouTube page at DST Eastern Panhandle Alumnae Chapter.

For more information on the Go Red for Women campaign and heart disease in women, visit www.goredforwomen.org/en/about-heart-disease-in-women/signs-and-symptoms-in-women.