Heart-Health Screenings

The key to preventing cardiovascular disease, also called coronary artery disease (CAD), is managing your risk factors, such as high blood pressure, high total cholesterol or high blood glucose. But how do you know which risk factors you have? The best way to find out is through screening tests during regular doctor visits.

"Regular cardiovascular screening is important because it helps you detect risk factors in their earliest stages," said Barry A. Franklin, Ph.D., director at William Beaumont Hospital in Royal Oak, Mich., and an American Heart Association volunteer. "This way, you can treat the risk factor with lifestyle changes and pharmacotherapies, if appropriate, before it ultimately leads to the development of cardiovascular disease."

Few of us have ideal risk levels on all screening tests. However, if you do have test results that are less than ideal, it doesn’t mean you’re destined to develop a serious cardiovascular disease. On the contrary, it means you’re in position to begin changing your health in a positive way.

“For many patients, screening results can serve as a wake-up call," Franklin said. “Higher than optimal cholesterol or body mass index, for example, may drive home the message that it’s time to modify your diet and get more physical activity. When the test comes back and you see abnormal numbers, it becomes personal. Suddenly, the idea of making lifestyle changes isn’t just a recommendation in a pamphlet. It’s something that can impact your life and health."

Most regular cardiovascular screening tests should begin at age 20. The frequency of follow up will depend on your level of risk.

You will probably require additional and more frequent testing if you’ve been diagnosed with a cardiovascular condition such as heart failure or atrial fibrillation, or if you have a history of heart attack, stroke or other cardiovascular events. Learn more about these more specific tests at the American Heart Association’s Cardiovascular Conditions website. Even if you haven’t been diagnosed with a condition, your doctor may want more stringent screening if you already have risk factors or a family history of cardiovascular disease.

Here are the key screening tests recommended for optimal cardiovascular health:

**Blood Pressure**

Blood pressure is one of the most important screenings because high blood pressure usually has no symptoms so it can’t be detected without being measured. High blood pressure greatly increases your risk of heart disease and stroke. If your blood pressure is below 120/80 mm Hg, be sure to get it checked at least once every two years, starting at age 20. If your blood pressure is higher, your doctor may want to check it more often. High blood pressure can be controlled through lifestyle changes or medication. After age 65, women have a higher risk of high blood pressure than men, and African-American adults of all ages have a higher-than-average risk.
Fasting Lipoprotein Profile (cholesterol and triglycerides)

You should have a fasting lipoprotein profile taken every four to six years, starting at age 20. This is a blood test that measures total cholesterol, LDL (bad) cholesterol, HDL (good) cholesterol and triglycerides. (Learn more about cholesterol and triglyceride levels.) You may need to be tested more frequently if your healthcare provider determines that you’re at an increased risk for heart disease or stroke.

Older women tend to have higher triglyceride levels than men. Like high blood pressure, often cholesterol and triglycerides can be controlled through lifestyle changes or medication.

Body Weight

Starting around 20 years old, your healthcare provider may ask for your waist circumference or use your body weight to calculate your body mass index (BMI) during your routine visit. These measurements may tell you and your physician whether you’re at a healthy body weight and composition. About two of every three adults are now overweight or obese. Being obese puts you at higher risk for health problems such as heart disease, stroke, high blood pressure, diabetes, and more.

Blood Glucose

Starting at age 45, you should have your blood glucose level checked at least every three years. High blood glucose levels put you at greater risk of developing insulin resistance, prediabetes and type 2 diabetes. Untreated diabetes can lead to many serious medical problems including heart disease and stroke. If you’re overweight AND you have at least one additional cardiovascular risk factor, your doctor may recommend a blood glucose test even if you’re not yet 45, or more frequently than every 3 years.

Smoking, physical activity, diet

Smoking is the most important preventable cause of premature death in the United States. If you smoke, tell your doctor at your next healthcare visit. If you smoke, your doctor can suggest approaches to help quit. Also discuss your diet and physical activity habits. If there’s room for improvement in your diet and daily physical activity levels, ask your doctor to provide helpful suggestions.
## Recommended Schedule for Screening Tests

<table>
<thead>
<tr>
<th>Recommended Screenings</th>
<th>How Often?</th>
<th>Starting when?</th>
</tr>
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<tbody>
<tr>
<td>Blood pressure</td>
<td>Each regular healthcare visit or at least once every 2 years if blood pressure is less than 120/80 mm Hg</td>
<td>Age 20</td>
</tr>
<tr>
<td>Cholesterol (&quot;fasting lipoprotein profile&quot; to measure total, HDL and LDL cholesterol, and triglycerides)</td>
<td>Every 4-6 years for normal-risk people; more often if any you have elevated risk for heart disease and stroke</td>
<td>Age 20</td>
</tr>
<tr>
<td>Weight / Body Mass Index (BMI)</td>
<td>During your regular healthcare visit</td>
<td>Age 20</td>
</tr>
<tr>
<td>Waist circumference</td>
<td>As needed to help evaluate cardiovascular risk. This is a supplemental measurement if your BMI is greater than or equal to 25 kg/m2.</td>
<td>Age 20</td>
</tr>
<tr>
<td>Blood glucose test</td>
<td>At least every 3 years</td>
<td>Age 45</td>
</tr>
<tr>
<td>Discuss smoking, physical activity, diet</td>
<td>Each regular healthcare visit</td>
<td>Age 20</td>
</tr>
</tbody>
</table>

## Coronary Heart Disease Risk Factors

### Major Risk Factors That Can’t Be Changed

- Increasing Age: About 80 percent of people who die of coronary heart disease are 65 or older.
- Male Sex (Gender): Men have a greater risk of heart attack than women do, and they have attacks earlier in life.
- Heredity (Including Race): Children of parents with heart disease are more likely to develop it themselves.

### Major Risk Factors That Can Be Modified, Treated or Controlled

- Tobacco Smoke: Smokers' risk of developing coronary heart disease is 2-4 times that of nonsmokers.
- High Blood Cholesterol: As LDL rises, so does risk of coronary heart disease.
- High Blood Pressure: High blood pressure increases the heart’s workload, causing the arteries to thicken and become stiffer.
- Physical Inactivity: An inactive lifestyle is a risk factor for coronary heart disease.
Obesity and Overweight: People who have excess body fat — especially at the waist — are more likely to develop heart disease and stroke.

Diabetes: Diabetes increases your risk of developing cardiovascular disease.

Other Factors To Consider

- Stress: Individual response to stress may be a contributing factor.
- Alcohol: If you drink, limit your alcohol consumption to no more than two drinks per day for men and no more than one drink per day for women. Heavy drinking can increase risk of high blood pressure, obesity, stroke and other diseases.
- Diet and Nutrition: A healthy diet is one of the best weapons you have to fight cardiovascular disease.