

Brazilian Society of Cardiology - The Women's Letter

João Pessoa, Paraíba, Brazil, May 17, 2019

Objective

The primary objective of this document is to stimulate improvements in women's health conditions in Brazil, with a focus on cardiovascular disease (CVD), which is responsible for 17.5 million premature deaths yearly worldwide. This number is predicted to increase to 23 million by 2030. CVD are responsible for one third of all deaths in Brazil, with similarities between men and postmenopausal women. These data assume even greater importance when we consider that 80% of premature deaths could have been avoided by controlling four risk factors: tobacco use, inappropriate diet, physical inactivity, and harmful alcohol use.¹

This document further aims to create a permanent discussion group that will play a leadership role in Brazilian healthcare policies, providing administrators with an overall view of the relevance of CVD to women so that they may establish strategic actions to reduce the prevalence of risk factors and improve diagnosis and therapeutic approach, thus reducing mortality and morbidity.

Foreword

Considering that the burden of chronic noncommunicable diseases (CNCD), of which CVD are the main component, will continue to grow significantly in Brazil and worldwide; in line with the global target of a 25% reduction in premature mortality from noncommunicable diseases by 2025 as established by the World Health Assembly (WHA);² and in accordance with the United Nations High-level Meeting on the Prevention and Control of Noncommunicable Diseases, we endorse the measures proposed by this Assembly which reunited the cardiology societies of the Rio de Janeiro

Letter, also highlighting the importance of goals to be met for women, who currently represent 48% of the 7.7 billion inhabitants of the world and 47% of the 202,768,562 individuals who compose the population of Brazil, as of April 2019.

In recognition of the fact that, predominantly among younger doctors, the proportion of women doctors has increased over the past years, going from 22% in 1910 to 45.6% in 2018, and considering the fact that this increase has been less accelerated among women cardiologists, where women currently represent approximately 30% of the total,⁵ we highlight the importance of promoting activities whose aim is to multiply healthcare opportunities from women's point of view, allowing for the integration and exchange of experience which will amplify improvements in daily clinical practice.

Emphasizing that the presence of women in science today corresponds to 28% of researchers worldwide, according to UNESCO, and 49% in Brazil,⁶ with less than one quarter of speakers at scientific events being women, in addition to the low representation of women in clinical trials which determine therapies to be used, we propose that forums be held, wherein it will be possible to discuss cost-effective, short- and long-term measures to decrease these inequalities, as well as affirmative policies which may accelerate women's representation in science and clinical research.

In conclusion, knowing the relevance of the role which medical societies and their associates play as critical agents for paradigm change and the establishment of multiple partnerships, we call on these entities to be protagonists in the elaboration of documents which will act as tools to accelerate these results.

Deliberations

1. To work collectively to defend global goals for the prevention and control of CNCD, especially CVD, in Brazilian women.

References

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2. To establish cardiovascular prevention campaigns, promoting efforts consistent with the global goal of 25% reduction in mortality rates by 2025.

3. To perform critical analyses of health statistics and to implement registers capable of evaluating and measuring cardiovascular health issues, so that there may be improvements in strategic health actions.

4. To elaborate and suggest government policies to promote appropriate environments for reducing exposure to risks, facilitating the population's adoption of healthy habits in school, work, and leisure environments, with the aim of combating CVD in women.

5. To work and act together with governments for the development and application of cardiovascular prevention programs, in addition to incorporating cost-effective technologies to reduce CVD morbidity and mortality

6. To involve patients with CVD and diverse segments of civil society in formulating, implementing, and reviewing policies, legislation, and discussion on strategies which may lead to improvements in women's healthcare.

7. To develop collaborative projects through scientific societies which may aggregate different forms of knowledge in order to reduce genders inequalities.

8. To provide the highest level of continuing medical education, to promote technical, scientific, cultural, and social exchanges between cardiologists in Brazil and worldwide, and to cultivate the scientific knowledge necessary to increase women's participation in science, scientific events, and health and related sciences.

9. To mobilize means of communication in order to bring continual information on the importance of CVD in women, as well as its primary risk factors and forms of prevention, thus amplifying the transmission of the importance of early diagnosis to the general population.

10. To create an international permanent discussion forum in order to monitor actions with the aim of preventing, diagnosing, and treating cardiovascular risk factors.

11. To stimulate actively the greater participation of women cardiologists in Executive Boards of Representative Bodies, so that they may have the same rights and remuneration in the diverse aspects of their medical careers.