Scientific Session on:

INTEGRATION OF GENDER MEDICINE IN THE CLINICAL PRACTICE

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DIFFERENT GENDER IMPACT
OF RISK FACTORS
IN CARDIOVASCULAR DISEASES,
DIABETES AND METABOLIC SYNDROME:
DO WE HAVE DATA ENOUGH
TO DIFFERENTIATE TREATMENT IN WOMEN?

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CHD is the first cause of women mortality in all industrialized countries. Classical risk factors for atherosclerosis have been studied more in men than in women, and their impact is different in the sexes: diabetes is much more dangerous for cardiovascular complications in women, lipids profiles are differently influencing atherogenesis in women (HDL-cholesterol, trialycerides and non-HDL cholesterol are more important than total cholesterol, and LDL-cholesterol), inflammation biomarkers as CPR and cytokines seem to be higher in the presence of risk factors in women. Metabolic Syndrome is one of the stronger clusters of risk factors and has a prevalence of 60% in women over 65 years of age. However women are less treated for diabetes, dislipidemias, hypertension, obesity and the goal of treatment is far less reached. From the biological point of view the main target of risk factors on damaging arterial wall is the endothelial function. Estrogens have a much positive influence on endothelial function and this may be one the most important differences between sexes for the vulnerability to atherosclerosis. This gives reason also to the fact that women develop CHD 10 years after men. However a recent research on young acute myocardial infarction women and men describes strong differences in extent of coronary artery lesions as well as risk factors profile, and suggests sex-related differences in the mechanisms underlying the atherosclerosis process that need further evaluation.

Evidence Based Medicine for prevention of CVD in women is scanty, and Women Guidelines are obtained from populations not existing in the "real word". Thus how should be treated women in primary and secondary prevention of CVD in our routinely work?

Curriculum Vitae Giovannella Baggio, MD

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EDUCATIONAL BACKROUND

1972: M.D. cum laude, University of Padua, Italy

1974: Speciality in Endocrinology, University of Pavia, Italy 1979: Specialty in Internal Medicine, University of Padua, Italy

POSTDOCTORAL TRAINING

1975-1976: Research Fellow, Lipid Clinic, Lufolf Krehl Klinik, University of Heidelberg, Germany

1977-1980: Research Associate, Atherosclerosis Centre, University of Padua 1980-1987: Assistant Professor of Internal Medicine, University of Padua

PROFESSIONAL APPOINTMENTS

1987-1991: Associate Professor of Geriatrics and Gerontology, University of Pavia, Italy 1991-1995: Associate Professor of Geriatrics and Gerontology, University of Padua, Italy 1995-1999: Full Professor of Medicine, Chair of Geriatrics and Gerontology, University of Sassari

1999- present: Director of the Internal Medicine Institute, University Hospital, Padua, Italy

SCIENTIFIC FIELDS OF INTEREST

1- Lipoprotein metabolism:

Primary and secondary hyperlipidemia; relationship between lipoproteins levels and atherosclerosis; pharmacological and dietary treatment of dislipidemias, LDL apheresis; lipoprotein metabolism and liver diseases, in particular cholestasis (first description of lipoprotein X); apoprotein CII Deficiency (Familial Chylomicronemia); genetic mutations of apoprotein CII; in vivo kinetic of lipoproteins E and CII; mutations of apoprotein B; lipoprotein metabolism in elderly.

2 - Geriatric fields:

- A Epidemiological study: co-director the Pro.V.A. study: cross sectional and longitudinal study in 3000 old subjects in order to determine risk factors for disability in the Veneto Region
- B Genetic and environmental determinants of Longevity: director of the AKEA Study (first epidemiological representative study of Centenarians in Sardinia); co-director of the project "Demographic Analysis of Sardinia Longevity" funded by NIA of NIH (U.S.).
- 3 Gender Differences in Medicine:
- A Different gender impact of risk factors for atherosclerosis
- B Founder of the first "Centro Studi Italiano per la Salute e Medicina di Genere"