



PREVALENCE OF HEART DISEASE IN SEXUAL MINORITY VETERANS

Shane Lamba, MPH, Office of Health Equity, Lauren Korshak, DHealth(c), MS, ACSM-CEP, Office of Health Equity, Arash Harzand, MD, MBA, Atlanta VA Medical Center, Raegan Hanlon, PsyD, Atlanta VA Medical Center, Amit Shah, PharmD, Atlanta VA Medical Center

INTRODUCTION

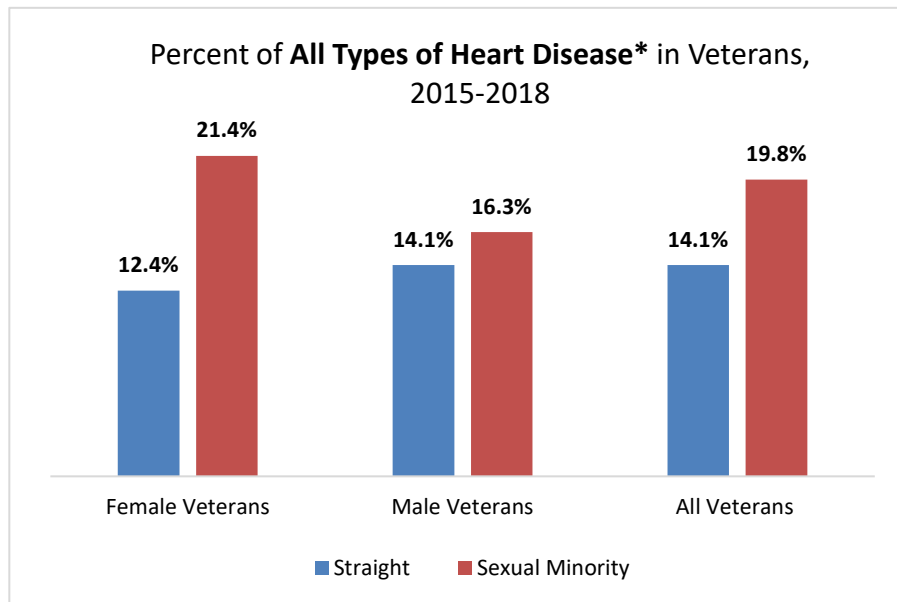
The Veterans Health Administration (VHA) serves a growing population of Veterans who identify as lesbian, gay, bisexual, transgender, questioning, and other identities beyond LGBTQ (LGBTQ+). Limited data exist on the physical health of LGBTQ+ Veterans, including cardiovascular health. The Office of Health Equity (OHE) champions the elimination of health disparities and achieving health equity for all Veterans.

HEART DISEASE DISPARITIES

According to the Centers for Disease Control and Prevention (CDC), heart disease is the leading cause of death in the United States. There are several risk factors associated with heart disease such as high cholesterol, smoking, diabetes, being overweight/obese, low physical activity levels, and excessive alcohol use.

The National Health Interview Survey analyzed data that were collected between 2015-2018 of adults ages 20 or older. Their data found several differences in the rates of heart disease among Veteran populations. For example, differences exist for sexual minority Veterans, also known as lesbian, gay or bisexual (LGB) Veterans.

Overall, compared to straight Veterans, sexual minority Veterans had the highest rates of heart disease across both genders (14.1% vs. 19.8%). There were in fact gender-based differences. Sexual minority female Veterans were up to 2 times more likely to have heart disease compared to the straight female Veterans (21.4% vs. 12.4%).



Source: 2015-2018 National Health Interview Survey Data. (Age-adjusted)

*All Types of Heart Disease include any of the following: coronary heart disease, angina, heart attack, or any other heart condition/disease.

VIRTUAL AT-HOME CARDIAC REHABILITATION

The Office of Health Equity (OHE) supports efforts across VA working to reduce health disparities by targeting interventions aimed at Veteran groups who are at higher risk for poor health outcomes.

Cardiac rehabilitation (CR) is recommended for individuals who have coronary heart disease because it reduces the risk of cardiovascular death and hospital readmission after a heart attack. Not all VA medical centers (VAMCs) have programs so Veterans may have to travel long distances to their nearest program. Despite these lifesaving benefits, less than 10% of eligible Veterans enroll in the cardiac rehabilitation program at their local VAMC.

To address low enrollment rates, virtual CR has been proposed as a safe and effective alternative to center-based programs for low to moderate risk Veterans with heart disease. The program at the Atlanta VAMC utilizes remote monitoring and follow up by a multi-disciplinary team of clinicians to ensure that Veterans improve their health through guided lifestyle change programming.

Holistic Approaches to Cardiac Rehabilitation

Unique to the Atlanta VAMC's CR program are their efforts to consider holistic care approaches, starting with their cardiac psychology services. A

cardiac psychologist assists Veterans in coping with the impact their cardiac event has had on their life, physical functioning, and overall quality of life. Treatment aligns with the multi-disciplinary team of clinicians to educate Veterans to make healthy lifestyle changes such as maintaining an exercise routine, modifying their diet, and smoking cessation, etc. Additionally, since cultural factors can influence these behaviors in cases where a Veteran identifies stress related to their LGB identity as a stressor impacting their health, they can be referred to Atlanta VAMC's LGBTQ+-specialized psychology program.

Recent research shows that LGB Veterans were less likely to have positive healthcare experiences compared to straight Veterans when seeking healthcare at VA (Grozdanic & Lamba et al., 2022). Since virtual CR allows for Veterans to access healthcare services remotely, this may provide an opportunity for LGB Veterans who feel uncomfortable at VA facilities when seeking care improve their cardiac health.

For more information about the Office of Health Equity visit: <https://www.va.gov/healthequity/>

References

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