



## Our Hearts. Our Stories.

Stories of Resilience from Women Living with Heart Disease

### Transcript: Gayl's Story

My name is Gayl. I was diagnosed with coronary artery disease in 2015 and then had a triple bypass in March of 2016, followed by a stent in October of that same year. I am lucky—I did not have a heart attack, or I probably would not be here right now.

My somewhat lengthy but very lucky story started in the summer of 2015. After a knee replacement, I had trouble and was given a cortisone shot to try and relieve my nerve pain. That gave me a very odd, uncomfortable feeling in my chest. I went back to my doctor and said, "Let's not do that again. That was really not great."

We started to talk, and this is where I am also very lucky—my doctor actually listened to what I said, asked me really good questions, asked me about my family's heart history, and then decided, "Let's just send you for a stress test and see how you're doing."

I went for my stress test, which I failed. At the time, the nurses said, "Don't worry, this test is made for men, and there's a 30% false positive for women." I was shocked. I said, "How can this be?" And they said, "It's made for men. Men are the ones they did the research on, so it's made for men."

That was my introduction to just how differently women are from men when it comes to heart health. I had no idea. But after failing my stress test, I ended up going for a CT scan, which I also failed. Then, I went for an angiogram, where they found that I had almost 90% blockage at the very top of my LAD, which is exactly where the widowmaker is—and it was in the worst possible position. If that blocked, there would be no blood going to the left side of my heart. My odds of surviving that would be slim to none.

So again, I just felt really, really lucky. I waited a few months, got my triple bypass, and went to rehab. Everything was fine. But I had signed up as part of a research project, and after six months, in September of that year, they went back in and did an angiogram to check how things were going.

They were absolutely shocked to find that my major bypass for the widowmaker had actually collapsed. I had no symptoms before of any issues with that, and I had no symptoms after the bypass collapsed as well. I was really lucky all over again that I had participated in the research study—because normally, people do not have an angiogram afterward to see how everything went. They ended up having to put a stent where the bypass had collapsed.

Little did I know that while my heart was finally fixed, going through all of this—waiting, not knowing if my heart was going to stop in the months between my diagnosis and my triple bypass, finding out that I had been living with a potentially life-threatening condition while kayaking, hiking, and doing all sorts of activities all summer—my mind did not deal well with it.

Even though I went back to work, my work was very stressful, and I found myself unable to do my tasks as I needed to. So I retired. And I thought, *Now what?* I was too young—I wasn't even 60 years old. What do I do now with my life?

Part of my new normal was that, as I had been coming out of rehab, I noticed signage for the Canadian Women's Heart Health Centre. One day, I marched myself in and said, "Here I am. What can I do for you?"

I decided that if I had gone through this and had struggled, how many other women were going through the same thing? So I became a peer support leader for the Women@Heart peer support program, and I have been doing that for eight years ever since.

Every single program I do, I just feel so lucky to be part of this—to help women find their new normal all over again. And when you help others, you help yourself.

As women, we tend to be caretakers of others. And we need to learn to be better caretakers of ourselves.