

**Letter to the Editor****Re: Assessing and addressing cardiovascular risks in young women by Wilbur et al. (2018)**

As a family nurse practitioner, the provision of preventative primary health care to ensure healthy lives and promote well-being across the lifespan is essential. In doing that, sustainable development goal 3 can be targeted to reduce one-third premature death for all ages by 2030 (GAPFON report, 2017). However, the increased risk of cardiovascular disease mortality in young women over the past two decades is alarming and calls for a shift in interdisciplinary reform between primary care providers and specialists of this group (Wilbur, Braun, Arslanian-Engoren, Lauver, & Halloway, 2018). As stated in this article, many factors increasing young women risks are supported in the literature. Catov et al. (2018) discovered young women with adverse pregnancy outcomes such as gestational diabetes... could develop cardiac complications as early as 2 to 7 years post-delivery. Beckowski et al. (2018) found that young women with diabetes mellitus have a six fold increased risk for adverse cardiac outcomes. Furthermore, a cross-sectional study of Danish young adults revealed that young women had higher rates of depression prompting them to engage in unhealthy risky behaviors such as drinking, smoking, and poor eating habits, leading to cardiac disease (Klakk et al., 2018). Unhealthy sleeping habit is also linked to increased cardiovascular risks in young women (Aggarwal et al., 2018).

Because young women as well as their providers tend to underestimate their risks for adverse cardiac events (Wilbur et al., 2018), the need for scrutinous health promotive behaviors and education is warranted to target all young women at risks since their cardiac risk factors differ from that of the older women (Beckowski et al., 2018). In addition, all specialists involved in the care of young women should adopt a holistic approach to ensure proper follow-up among specialties on high risks young women. Achieving sustainable development goal 3 is a daunting task as the care of young women is complex. While waiting for new recommendations that dictate how to efficiently target this group, health care providers should take

initiatives in their respective environments, communities, churches, beauty salons “to educate young women about their risks for developing cardiac disease” (Beckowski et al., 2018). By heightening awareness on this health indicator, young women in the community can be empowered to take control of their heart health and become health partners with their providers locally, nationally, and globally.

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