Indian Women, Trauma and Bisexual (FSF and FSM) Connections in Higher Risk for Heart Disease

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Abstract

A bisexual relationship can break heart. Bisexual women, according to a study, have a higher risk for heart disease. Turns out, for women, being bisexual can be injurious to health. According to a study conducted by the New York University, bisexual women have a higher risk for heart disease compared with heterosexual women across several modifiable risk factors [1-3]. “Our findings highlight the impact of sexual orientation, specifically sexual identity, on the cardiovascular health of women and suggest clinicians and public health practitioners should develop tailored screening and prevention to reduce heart disease risk in bisexual women,” Little is known about the impact of sexual orientation on heart disease risk in women, despite the fact that gay and bisexual women may be at a higher risk based on modifiable factors like tobacco use and poor mental health.

Keywords: Bisexual; Heterosexual; Sexual Orientation

Introduction

In this study, the researchers examined differences in modifiable risk factors for heart disease and heart disease diagnoses in men of different sexual orientations [4]. Risk factors measured included mental distress; health behaviors such as tobacco use, binge drinking, diet, and exercise; and biological risk factors such as obesity, hypertension, diabetes, and cholesterol. Participants who reported having angina, coronary heart disease, heart failure, heart attack, or stroke were considered as having a diagnosis of heart disease. The researchers analyzed responses from 7,731 women ages 20 to 59. Differences were analyzed across four groups based on their sexual identities: gay women, bisexual women, heterosexual women who have sex with women, and heterosexual women [5-7]. The researchers found no differences in heart disease diagnoses based on sexual orientation, but the risk for heart disease was more complicated. Gay women, heterosexual women, and heterosexual women who have sex with women had similar heart disease risk. Gay women reported lower binge drinking compared with heterosexual women, but otherwise few differences in health behaviors were noted. Bisexual women, however, had higher rates of several risk factors for heart disease relative to heterosexual women: mental distress, obesity, elevated blood pressure, and three different measures of diabetes (medication use, medical history, and average glycosylated hemoglobin level). “Poor mental health is a recognized risk factor for the development of heart disease,” “Clinicians should be educated about sexual minority health and should routinely screen bisexual women for mental distress as a risk factor for heart disease [8]. This is particularly important as healthcare organizations increasingly include sexual orientation as part of demographic questionnaires in electronic health records.” The researchers also noted that the study underscores the importance of disaggregating analyses for gay and bisexual participants to ascertain differences in health outcomes between these subgroups.

Conclusion

Unsymmetrical human body structure and destabilization of hormones and adrenal fatigues can move to Indian women towards bisexual connections and higher risk for heart disease in middle and post middle age.

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References


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