

Strategies to prevent heart disease

You can help prevent heart disease by following a heart-healthy lifestyle. Here are strategies to help you protect your heart.

Heart disease is a leading cause of death. You can't change some risk factors for it, such as family history, sex at birth or age. But you can take plenty of other steps to lower your risk of heart disease.

Get started with these eight tips to boost your heart health:

1. Don't smoke or use tobacco

One of the best things you can do for your heart is to stop smoking or using smokeless tobacco. Even if you're not a smoker, be sure to stay away from secondhand smoke.

Chemicals in tobacco can damage the heart and blood vessels. Cigarette smoke lowers the oxygen in the blood, which raises blood pressure and heart rate. That's because the heart has to work harder to supply enough oxygen to the body and brain.

There's good news though. The risk of heart disease starts to drop in as little as a day after quitting. After a year without cigarettes, the risk of heart disease drops to about half that of a smoker. No matter how long or how much you smoked, you'll start reaping rewards as soon as you quit.

2. Get moving: Aim for at least 30 to 60 minutes of activity daily

Regular, daily physical activity can lower the risk of heart disease. Physical activity helps control your weight. It also lowers the chances of getting other conditions that may put a strain on the heart. These include high blood pressure, high cholesterol and type 2 diabetes.

If you haven't been active for a while, you may need to slowly work your way up to these goals. But in general, you should aim for at least:

- 150 minutes a week of moderate aerobic exercise, such as walking at a brisk pace.
- 75 minutes a week of vigorous aerobic activity, such as running.
- Two or more strength training sessions a week.

Even shorter bouts of activity offer heart benefits. So if you can't meet those guidelines, don't give up. Just five minutes of moving can help. Activities such as gardening, housekeeping, taking the stairs and walking the dog all count toward your total. You don't have to exercise hard to benefit. But you can see bigger benefits if you boost the intensity, length and frequency of your workouts.

3. Eat a heart-healthy diet

A healthy diet can help protect the heart, improve blood pressure and cholesterol, and lower the risk of type 2 diabetes. A heart-healthy eating plan includes:

- Vegetables and fruits.
- Beans or other legumes.
- Lean meats and fish.

- Low-fat or fat-free dairy foods.
- Whole grains.
- Healthy fats such as olive oil and avocado.

Two examples of heart-healthy food plans include the Dietary Approaches to Stop Hypertension (DASH) eating plan and the Mediterranean diet.

Take in less of the following:

- Salt or high-sodium meals.
- Sugar or sweetened beverages.
- Highly refined carbohydrates.
- Alcohol.
- Highly processed food, such as processed meats.
- Saturated fat, which is found in red meat, full-fat dairy products, palm oil and coconut oil.
- Trans fat, which is found in some fried fast food, chips and baked goods.

4. Maintain a healthy weight

Being overweight — especially around the middle of the body — raises the risk of heart disease. Extra weight can lead to conditions that raise the chances of getting heart disease. These conditions include high blood pressure, high cholesterol and type 2 diabetes.

The body mass index (BMI) uses height and weight to find out whether a person is overweight or obese. A BMI of 25 or higher is considered overweight. In general, it's linked with higher cholesterol, higher blood pressure, and an increased risk of heart disease and stroke.

Waist circumference also can be a useful tool to measure how much belly fat you have. The risk of heart disease is higher if the waist measurement is greater than:

- 40 inches (101.6 centimeters, or cm) for men.
- 35 inches (88.9 cm) for women.

Even a small weight loss can be good for you. Reducing weight by just 3% to 5% can help lower certain fats in the blood called triglycerides. It can lower blood sugar, also called glucose. And it can cut the risk of type 2 diabetes. Losing even more helps lower blood pressure and blood cholesterol levels.

5. Get quality sleep

People who don't get enough sleep have a higher risk of obesity, high blood pressure, heart attack, diabetes and depression.

Most adults need at least seven hours of sleep each night. Children usually need more. So make sure you get enough rest. Set a sleep schedule and stick to it. To do that, go to bed and wake up at the same times each day. Keep your bedroom dark and quiet too, so it's easier to sleep.

Talk to a member of your health care team if you feel like you get enough sleep but you're still tired throughout the day. Ask if you need to be evaluated for obstructive sleep apnea. It's a condition that can raise your risk of heart disease. Symptoms of obstructive sleep apnea include loud snoring, stopping breathing for short times during sleep and waking up gasping for air. Treatment for obstructive sleep apnea may involve losing weight if you're overweight. It also might involve using a device that keeps your airway open while you sleep. This is called a continuous positive airway pressure (CPAP) device.

6. Manage stress

Ongoing stress can play a role in higher blood pressure and other risk factors for heart disease. Some people also cope with stress in unhealthy ways. For example, they may overeat, drink or smoke. You can boost your health by finding other ways to manage stress. Healthy tactics include physical activity, relaxation exercises, mindfulness, yoga and meditation.

If stress becomes overwhelming, get a health care checkup. Ongoing stress may be linked with mental health conditions such as anxiety and depression. These conditions also are tied to heart disease risk factors, including higher blood pressure and less blood flow to the heart. If you think you might have depression or anxiety, it's important to get treatment.

7. Get regular health screening tests

High blood pressure and high cholesterol can damage the heart and blood vessels. But if you don't get checked for these conditions, you likely won't know whether you have them. Regular screening tests can tell you what your numbers are and whether you need to take action.

- **Blood pressure.** Regular blood pressure screenings usually start in childhood. Starting at age 18, blood pressure should be measured at least once every two years. This checks for high blood pressure as a risk factor for heart disease and stroke.

If you're between 18 and 39 and have risk factors for high blood pressure, you'll likely be screened once a year. People age 40 and older also are given a blood pressure test yearly.

- **Cholesterol levels.** The National Heart, Lung, and Blood Institute (NHLBI) recommends that cholesterol screenings start between the ages of 9 and 11. Earlier testing may be recommended if you have other risk factors, such as a family history of early-onset heart disease. After the first cholesterol test, screenings should be repeated every five years. Then the timing changes with age. The NHLBI recommends that women ages 55 to 65 and men ages 45 to 65 get screened every 1 to 2 years. People over 65 should get their cholesterol tested once a year.
- **Type 2 diabetes screening.** Diabetes involves ongoing high blood sugar levels. It raises the chances of getting heart disease. Risk factors for diabetes include being overweight and having a family history of diabetes. If you have any of the risk factors, your health care team may recommend early screening. If not, screening is recommended starting at age 45. Then you get your blood sugar levels tested again every three years.

If you have a condition such as high cholesterol, high blood pressure or diabetes, talk with your health care team. Your doctor may prescribe medicines and recommend lifestyle changes. Make sure to take your medicines exactly as prescribed, and follow a healthy-lifestyle plan.

8. Take steps to prevent infections

Certain infections may lead to heart problems. For instance, gum disease may be a risk factor for heart and blood vessel diseases. So brush and floss daily. Get regular dental checkups too.

Other illnesses caused by infections can make existing heart problems worse. Vaccines help protect against infectious diseases. So stay up to date on the following shots:

- Yearly flu vaccine.
- COVID-19 vaccine, which lowers the chances of getting very sick.
- Pneumococcal vaccine, which reduces the risk of certain illnesses caused by bacteria.
- Tdap vaccine, which protects against tetanus, diphtheria and pertussis.

Ask your health care professional if you need any other vaccines too.

What is heart disease?

Heart disease is a general term that includes many types of heart problems. It's a type of cardiovascular disease, which means heart and blood vessel disease.

Heart disease is the leading cause of death in the United States, but there are ways to prevent and manage many types of heart disease.

What are the types of heart disease?

There are many different types of heart disease. Some you may be born with, called [congenital heart disease](#). Other types develop during your lifetime.

[Coronary artery disease](#) (also called coronary heart disease) is the most common type of heart disease. It happens slowly over time when a sticky substance called plaque builds up in the arteries that supply your heart muscle with blood. The plaque narrows or blocks blood flow to the heart muscle and can lead to other heart problems:

- [Angina](#) - chest pain from lack of blood flow
- [Heart attacks](#) - when part of the heart muscle dies from loss of blood flow
- [Heart failure](#) - when your heart can't pump enough blood to meet your body's needs
- [Arrhythmia](#) - a problem with the rate or rhythm of your heartbeat

Other types of heart diseases may affect your [heart valves](#) or heart muscle ([cardiomyopathy](#)).

What causes heart diseases?

The causes of heart disease depend on the type of disease. Some possible causes include lifestyle, genetics, infections, medicines, and other diseases.

Who is more likely to develop heart diseases?

There are many different factors that can make you more likely to develop heart disease. Some of these factors you can change, but others you cannot.

- **Age.** Your risk of heart disease goes up as you get older.
- **Sex.** Some factors may affect heart disease risk differently in [women](#) than in men.

- **Family history and genetics.** A family history of early heart disease raises your risk. And research has shown that some genes are linked to a higher risk of certain heart diseases.
- **Race/ethnicity.** Heart disease is the leading cause of death in most racial and ethnic groups in the United States. However, certain groups have higher risks than others. This includes Black people, White people, and American Indian/Alaska Native people.
- **Lifestyle habits.** Over time, unhealthy lifestyle habits can raise your risk of heart disease. These can include:
 - Eating a diet high in saturated [fats](#), refined carbohydrates, and [salt](#).
 - Not getting [enough physical activity](#).
 - Drinking too much [alcohol](#).
 - [Smoking](#) and exposure to [secondhand smoke](#).
 - Too much [stress](#).
- **Having other medical conditions** can raise your risk of heart diseases. These conditions include:
 - [High blood pressure](#).
 - High [cholesterol levels](#).
 - [Diabetes](#).
 - [Obesity](#).
 - [Autoimmune](#) and inflammatory diseases.
 - [Chronic kidney disease](#).
 - [Metabolic syndrome](#).

What are the symptoms of heart disease?

Your symptoms will depend on the type of heart disease you have. You may not have symptoms at first. In some cases, you may not know you have heart disease until you have a complication such as a heart attack.

How are heart diseases diagnosed?

To find out if you have heart disease, your health care provider will:

- Ask about your **medical history**, including your symptoms
- Ask about your **family health history**, including relatives who have had heart disease
- Do a **physical exam**
- Likely run [heart tests](#) and **blood tests**

In some cases, your provider may refer you to a cardiologist (a doctor who specializes in heart diseases) for tests, diagnosis, and care.

What are the treatments for heart disease?

Treatment plans for heart disease depend on the type of heart disease you have, how serious your symptoms are, and what other health conditions you have. Possible treatments may include:


- Heart-healthy lifestyle changes
- Medicines
- Procedures or [surgeries](#)
- [Cardiac rehabilitation](#)

Can heart diseases be prevented?

You may be able to lower your risk of certain heart diseases by making [heart-healthy lifestyle changes](#) and managing any other medical conditions you have.

NIH: National Heart, Lung, and Blood Institute

Start Here

- [Heart Disease](#) (Mayo Foundation for Medical Education and Research)Also in [Spanish](#)
- [What Are Heart Disease and Stroke?](#) (American Heart Association)Also in [Spanish](#)
- [Your Guide to Living Well with Heart Disease](#)  (National Heart, Lung, and Blood Institute)

Cholesterol Levels



What is a cholesterol test?

A [cholesterol](#) test is a blood test that measures the amount of cholesterol and [triglycerides](#) (a type of fat) in your blood. Cholesterol is a waxy, fat-like substance that's found in your blood and every cell of your body. Your body needs some cholesterol to make [hormones](#), [vitamin D](#), and substances that help you digest foods.

Your liver makes all the cholesterol your body needs and removes excess amounts. Cholesterol is also found in foods from animal sources, such as meat, egg yolks, poultry, and dairy products. Foods high in [dietary fat](#) can increase the cholesterol in your blood. If there's too much cholesterol in your blood, your liver can't remove it all.

There are two main types of cholesterol: [LDL](#) (low-density lipoprotein), or "bad" cholesterol, and [HDL](#) (high-density lipoprotein), or "good" cholesterol.

Too much LDL cholesterol in your blood increases your risk for [coronary artery disease](#) and other [heart diseases](#). High LDL levels can cause the buildup of a sticky substance called plaque in your arteries. This buildup of plaque is known as [atherosclerosis](#). Over time, plaque can narrow your arteries or fully block them. When this happens, parts of your body may not get enough blood:

- If the blood flow to your heart is blocked, it can cause a [heart attack](#).

- If the blood flow to your brain is blocked, it can cause a [stroke](#).
- If the blood flow to your arms or legs is blocked, it can cause [peripheral artery disease](#).

Other names for a cholesterol test: Lipid profile, Lipid panel

What is it used for?

A cholesterol test gives you and your health care provider important information about your risk of developing heart disease. If your test shows you have high cholesterol, you can take steps to [lower it](#). This may decrease your risk of developing heart problems in the future.

A cholesterol test measures your:

- **LDL level.** LDL ("bad") cholesterol is the main source of blockages in the arteries.
- **HDL level.** HDL ("good") cholesterol helps get rid of "bad" LDL cholesterol. A higher HDL level may help reduce your risk of heart attack or stroke.
- **Total cholesterol.** This is a measure of the total amount of cholesterol in your blood. It includes HDL and LDL cholesterol.
- **Triglyceride level.** Triglycerides are a type of fat found in your blood. High levels of triglycerides may increase the risk of heart disease, especially in [women](#).

There is another type of cholesterol called [VLDL](#) (very low-density lipoprotein). Some people also call VLDL a "bad" cholesterol because it contributes to the buildup of plaque in your arteries. But VLDL and LDL are different; VLDL mainly carries triglycerides, and LDL mainly carries cholesterol. VLDL isn't usually included in routine cholesterol tests because it's difficult to measure. Because VLDL contains a certain percentage of triglycerides, a lab can use your triglycerides level to estimate your VLDL level.

Why do I need a cholesterol test?

Your provider may order a cholesterol test as part of a [routine exam](#). When and how often you should get a cholesterol test depends on your age, risk factors, and family history. The general recommendations are:

For people who are age 19 or younger:

- The first test should be between ages 9 to 11
- Children should have the test again every 5 years
- Some children may have this test starting at age 2 if there is a family history of high cholesterol, heart attack, or stroke

For people who are ages 20 to 65:

- Younger adults should have the test every 5 years
- Men ages 45 to 65 and women ages 55 to 65 should have it every 1 to 2 years

For people older than 65:

- They should be tested every year

You may also have a cholesterol test more often if you are at high risk of heart problems because of:

- A family history of heart disease
- [High blood pressure](#)
- [Type 2 diabetes](#)
- [Smoking](#)
- Excess weight or [obesity](#)
- [Lack of physical activity](#)
- A diet high in saturated fat

What happens during a cholesterol test?

A health care professional will take a blood sample from a vein in your arm, using a small needle. After the needle is inserted, a small amount of blood will be collected into a test tube or vial. You may feel a little sting when the needle goes in or out. This usually takes less than five minutes.

You may be able to use an [at-home kit](#) to check your cholesterol levels. Your kit will include a device to prick your finger to collect a drop of blood for testing. Be sure to follow the kit instructions carefully. Also, be sure to tell your provider if your at-home test shows that your total cholesterol level is higher than 200 mg/dL.

Will I need to do anything to prepare for the test?

You may need to [fast](#) (not eat or drink) for 9 to 12 hours before your blood cholesterol test. That's why the tests are often done in the morning. Your provider will let you know if you need to fast and if there are any other special instructions.

Are there any risks to the test?

There is very little risk to having a blood test. You may experience slight pain or bruising at the spot where the needle was put in, but most symptoms go away quickly.

What do the results mean?

Cholesterol is usually measured in milligrams (mg) of cholesterol per deciliter (dL) of blood. The information below will help you understand what your test results mean. In general, low LDL levels and high HDL cholesterol levels are good for heart health.

Anyone age 19 or younger:

Type of Cholesterol	Healthy Level
Total Cholesterol	Less than 170 mg/dL
Non-HDL	Less than 120 mg/dL
LDL	Less than 110 mg/dL

Type of Cholesterol	Healthy Level
HDL	More than 45mg/dL

Men age 20 or older:

Type of Cholesterol	Healthy Level
Total Cholesterol	Less than 200 mg/dL
Non-HDL	Less than 130 mg/dL
LDL	Less than 100 mg/dL
HDL	Greater than or equal to 60 mg/dL is best. Levels less than 40 mg/dL are considered low.

Women age 20 or older:

Type of Cholesterol	Healthy Level
Total Cholesterol	Less than 200 mg/dL
Non-HDL	Less than 130 mg/dL
LDL	Less than 100 mg/dL

The LDL listed on your results may say "calculated." This means that your LDL level is an estimate based on your total cholesterol, HDL, and triglycerides. Your LDL level may also be measured "directly" from your blood sample. Either way, you want your LDL number to be low.

A healthy cholesterol level for you may depend on your age, family history, lifestyle, and other risk factors for heart disease, such as high triglyceride levels. Your provider can explain what's right for you.

Learn more about [laboratory tests, reference ranges, and understanding results](#).

Is there anything else I need to know about my cholesterol levels?

High cholesterol can lead to heart disease, the number one cause of death in the United States. You can't change some risk factors for high cholesterol, such as age and your genes. But there are actions you can take to lower your LDL levels and reduce your risk, including:

- **Eat a healthy diet.** Reduce or avoid foods high in saturated fat and cholesterol to help lower the cholesterol levels in your blood.
- **Manage your weight.** Being overweight can increase your cholesterol and risk for heart disease.
- **Stay active.** Regular physical activity may help lower your LDL (bad) cholesterol levels and raise your HDL (good) cholesterol levels. It may also help you lose weight.
- **Quit smoking.** Smoking lowers your HDL (good) cholesterol, especially in women. Smoking also raises your LDL (bad) cholesterol.
- **Reduce stress.** Stress may raise levels of certain hormones such as corticosteroids. These can cause your body to make more cholesterol.
- **Avoid drinking too much alcohol.** Alcohol can raise your total cholesterol level.

Heart Disease Risk Assessment



What is a heart disease risk assessment?

[Heart disease](#) is the leading cause of death in the United States. A heart disease risk assessment, or cardiovascular disease (CVD) risk assessment, is a screening tool that measures your risk of heart disease or CVD. Heart disease and CVD are related, but they are not the same thing:

- **CVD** is the term for all diseases that affect the heart and [blood vessels](#).
- **Heart disease** is a type of CVD. It is the term for a variety of conditions that affect the heart's structure and function, including [coronary artery disease](#) (the most common type), [heart attack](#), [heart failure](#), and [heart valve diseases](#).

There are various screening tools that can check your heart disease risk, but they are meant to be used before you have a heart problem. You can complete a heart risk assessment online or at your health care provider's office. The risk assessment includes questions about certain risk factors, including your age, family history, and lifestyle habits such as diet and exercise. It then calculates your risk of developing heart disease in the future. Even if you feel healthy now, the assessment can show if you need to [take steps to prevent or reduce your chances of developing heart disease](#) later.

Other names: cardiovascular disease assessment, CVD risk factors assessment, heart disease risk calculator, ASCVD risk calculator

What is it used for?

Most heart disease risk assessments check how likely it is that you will develop heart disease in the next 10 years. Some also evaluate your 30-year or lifetime risk.

Why do I need a heart disease risk assessment?

Most of the assessments can be helpful if you are 40 to 75 years old and do not have heart disease. If you are younger than 40, there are a few new assessments that your provider may use if you have a family history of heart disease or certain CVD risk factors.

What happens during a heart disease risk assessment?

There are different types of heart disease risk assessments. These screening tools each include general questions about your health and possible risk factors for heart disease. Some common heart disease risk assessments include:

- **ASCVD Risk Calculator.** This tool helps predict your 10-year or lifetime risk of atherosclerotic cardiovascular disease (ASCVD). ASCVD refers to conditions caused by [atherosclerosis](#), which develops when plaque (fatty deposits) build up inside your arteries. The buildup can block blood flow and may lead to heart attack or [stroke](#).
- **ACC/AHA Cardiovascular Risk Calculator.** This is a shorter version of the ASCVD Risk Calculator. Both make suggestions to improve your risk score.
- **Pooled Cohort Equation (PCE).** This is an updated version of the ASCVD Risk Calculator, which estimates the 10-year risk of heart attack and/or stroke for people ages 30 to 79.
- **Predicting Risk of Cardiovascular Disease Events (PREVENT) Calculator.** This new tool considers other health conditions to estimate the risk of heart attack, stroke, and heart failure for people ages 30 to 79. It is used to estimate your 10- and 30-year risk.
- **Reynolds Risk Score.** This test was originally developed for women, but now they have a test that can be used for men. It estimates the 10-year risk of having a heart attack, stroke, or death related to heart disease for people ages 45 to 80. It is only used if you don't have [diabetes](#).

You can choose and complete a test online, or your health care provider may tell you which one might be best for you and/or review the questions with you. Your assessment may include questions about some or all of the following:

- Age
- Your sex
- Height and weight
- [Blood pressure](#)
- [Cholesterol](#) levels
- Whether you smoke or have [smoked](#) in the past
- Whether you have [diabetes](#)
- Activity level
- Diet
- Family history of heart conditions

Will I need to do anything to prepare for the test?

You don't need any special preparations for a heart disease risk assessment.

Are there any risks to the test?

There is no risk in taking a questionnaire.

What do the results mean?

Heart disease risk assessment results are calculated based on data from clinical studies on heart disease. Your answers will be compared with patient data from these studies. Your results will be given as a percentage.

- A **lower percentage** means you have less risk of developing heart disease.
- A **higher percentage** means you have a greater risk. If your percentage is high, your provider may recommend steps to lower your risk.

Some risk factors, such as age and family history, can't be controlled. But you can take steps to lower your risk for some factors, for example by:

- Eating a healthy diet
- [Getting regular physical activity](#)
- Limiting [alcohol](#) use
- [Quitting smoking](#).
- Managing [stress](#) and health conditions such as diabetes, high blood pressure, or high cholesterol

These steps can benefit all adults.

If you are at a high risk of heart disease, your provider may also recommend medicines. These medicines may be used to treat health conditions which raise your risk or to help prevent certain heart diseases: They may include:

- [Medicines to lower cholesterol](#), such as [statins](#).
- [Blood pressure medicines](#), also called antihypertensives
- [Blood thinners](#), which may help prevent heart attacks and strokes. This may include taking a daily aspirin. But aspirin therapy has some risks and is only recommended for people with certain risk factors for heart disease. Talk to your provider about the risks and benefits before you start taking a daily aspirin.

If you have questions about your results, talk to your provider.

Is there anything else I need to know about a heart disease risk assessment?

Depending on the results of your assessment, your provider may order additional tests including:

- [Cholesterol levels](#), a test that measures cholesterol levels in your blood
- [Electrocardiogram](#), a test that measures electrical signals in your heart
- [Stress test](#), a test that measures how well your heart handles physical activity

[Heart disease](#) is the leading cause of the death in the United States. It is also a major cause of disability. But you can take steps to improve your health and help prevent heart disease. The first step is understanding your risk of heart disease. Your risk depends on many factors, some of which are changeable and others that are not. Learning about them and working on the things that you can change can lower your risk of heart disease.

What are the heart disease risk factors that I cannot change?

There are some risk factors for heart disease that you cannot change:

- **Your age.** Your risk of heart disease increases as you get older. The risk is higher in:
 - Men age 45 and older
 - Women age 55 and older

- **Your sex.** Some risk factors may affect heart disease risk differently in [women](#) than in men. For example:
 - The [hormone](#) estrogen provides women some protection against heart disease
 - [Diabetes](#) raises the risk of heart disease more in women than in men.

- **Your race or ethnicity.** Certain groups have higher risks than others. For example:
 - African Americans are more likely than Whites to die of heart disease, while Hispanic Americans are less likely to die of it
 - Asian Americans as a group have lower rates of heart disease than other groups, but South Asian Americans have higher rates

- **Your family history.** You have a greater risk if you have a close family member who had heart disease at an early age, for example if:
 - Your father or brother was diagnosed before age 55
 - Your mother or sister was diagnosed before age 65

What are the heart disease risk factors I can change and what can I do to lower my risk?

There are many heart disease risk factors that you can change. If you make these changes, you don't just help protect your heart. You can also improve your overall health and well-being.

You may have a lot of changes to make. If you need to, you can make the changes gradually, one at a time. What's most important is that you make them. Depending on your lifestyle, these changes could include:

- **Controlling your blood pressure.** [High blood pressure](#) is a major risk factor for heart disease. It is important to get your [blood pressure](#) checked regularly - at least once a year for most adults, and more often if you have high blood pressure. You can also take steps, including lifestyle changes, to [prevent](#) or control high blood pressure.
- **Keeping your [cholesterol](#) and [triglyceride](#) levels under control:**
 - High levels of cholesterol can clog your arteries and raise your risk of [coronary artery disease](#) and [heart attack](#). [Lifestyle changes](#) and [medicines](#) (if needed) can lower your cholesterol.
 - Triglycerides are another type of fat in the blood. High levels of [triglyceride](#) may also raise the risk of coronary artery disease, especially in women.
- **Staying at a healthy weight.** Being overweight or having [obesity](#) can increase your risk of heart disease. This is mostly because they are linked to other heart disease risk factors, including high blood cholesterol and triglyceride levels, high blood pressure, and diabetes. [Controlling your weight](#) can lower these risks.
- **Eating a healthy diet.** Try to limit saturated [fats](#), foods high in [sodium](#) (salt), and added [sugars](#). Instead, eat plenty of fresh fruit, vegetables, and whole grains. The [DASH diet](#) is an example of an eating plan that can help you to lower your blood pressure and cholesterol, two things that can lower your risk of heart disease.
- **Getting regular physical activity.** Regular physical activity has many benefits, including strengthening your heart and improving your circulation. It can also help you maintain a healthy weight and lower cholesterol and blood pressure. All of these can lower your risk of heart disease.
- **Limiting [alcohol](#).** Drinking too much alcohol can raise your blood pressure. It also adds extra calories, which may cause weight gain. Both of those raise your risk of heart disease. It's best not to drink, but if you do:
 - Have no more than 2 drinks per day if you are a man.
 - Have no more than 1 drink per day if you are a woman.

- **Not smoking.** [Cigarette smoking](#) raises your blood pressure and puts you at higher risk of heart attack and [stroke](#).
 - If you do not smoke, don't start.
 - If you do smoke, [quitting](#) will lower your risk of heart disease. You can talk with your health care provider for help in finding the best way for you to quit.

- **Managing stress.** [Stress](#) is linked to heart disease in many ways. It can raise your blood pressure. Extreme stress can be a "trigger" for a heart attack. Also, some common ways of coping with stress, such as overeating, heavy drinking, and smoking, are bad for your heart. Some ways to help manage your stress include exercise, listening to music, focusing on something calm or peaceful, and meditating.

- **Managing diabetes.** Having diabetes doubles your risk of [diabetic heart disease](#). That is because over time, [high blood glucose](#) (blood sugar) from diabetes can damage your blood vessels and the nerves that control your heart and blood vessels. So, it is important to get [tested for diabetes](#), and if you have it, to keep it under control.

- **Getting enough sleep.** If you don't get enough sleep, you raise your risk of high blood pressure, obesity, and diabetes. Those three things can raise your risk of heart disease. To improve your sleep:
 - If you are an adult, try to get 7 to 9 hours of sleep per night.
 - Make sure that you have [good sleep habits](#), such as keeping a regular sleep schedule and creating a good sleeping environment in your bedroom.
 - If you have frequent [sleep problems](#), contact your health care provider. One problem, [sleep apnea](#), causes people to briefly stop breathing many times during sleep. This interferes with your ability to get a good rest and can raise your risk of heart disease. If you think you might have sleep apnea, ask your provider about having a [sleep study](#). And if you do have sleep apnea, make sure that you get treatment for it.