

Researchers probe link between people with mental illness and increased levels of mortality

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(Medical Xpress) -- New research from the University of Leicester raises concerns about higher than expected mortality following acute coronary events such as heart attack in those with significant mental ill health.

Researchers from the University of Leicester in the UK and Curtin Health Innovation Research Institute in Australia examined 22 previous studies involving 825,754 individuals, comparing care given to those with and without serious [mental disorders](#).

They discovered that there was higher than expected mortality following acute coronary events such as [heart attack](#) in those with significant [mental ill health](#).

Lead researcher Alex J. Mitchell, of the University of Leicester, University Hospitals of Leicester NHS Trust and Leicestershire Partnership Trust, said: “Those with a diagnosis of severe mental illness were 14% less likely to receive essential coronary care procedures following their heart attack.

“Such procedures include coronary artery bypass graft and coronary angioplasty which have been credited with improving outcomes after [heart disease](#) in the general population. In 10 studies that specifically addressed care for people with schizophrenia, those with the disease

received only half the interventions offered to those without schizophrenia.”

He added it was equally concerning that in six related studies involving 813,241 individuals that examined mortality following cardiac events, there was an 11% higher mortality rate in the year after acute heart disease for those with psychiatric diagnoses as compared to those without.

Dr Mitchell said: “People with known mental health conditions have higher background rates of cardiovascular risk factors such as smoking, inactivity, and obesity. We already know that this is reflected in a higher rate of heart disease but what we demonstrate here is that [mortality](#) is greater even after patients come under health care.

“We don’t yet know the reason for these poorer outcomes but it is worrying that we also find such patients may receive less frequent life saving interventions. Patients with significant mental health problems can be considered a vulnerable group who should be receiving at least equal and possibly enhanced care.

“We urgently need to know whether patients are declining treatment or whether clinicians are not offering treatment to an equal degree”.

The study by Alex J. Mitchell and David Lawrence, Curtin Health Innovation Research Institute, West Perth, Australia, is published today in the *British Journal of Psychiatry*.

Provided by University of Leicester

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