

Study links loneliness in older individuals to functional decline, death

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Loneliness in individuals over 60 years of age appears associated with increased risk of functional decline and death, according to a report published Online First by *Archives of Internal Medicine*.

In older persons, [loneliness](#) can be a common source of distress and impaired quality life, according to the study background.

Carla M. Perissinotto, M.D., M.H.S., of the University of California, San Francisco, and colleagues examined the relationship between loneliness and risk of functional decline and death in older individuals in a study of 1,604 participants in the Health and Retirement Study.

The participants (average age 71) were asked if they felt left out, isolated or a lack of companionship. Of the participants, 43.2 percent reported feeling lonely, which was defined as reporting one of the loneliness items at least some of the time, according to the study results.

Loneliness was associated with an increased risk of death over the six-year follow-up period (22.8 percent vs. 14.2 percent), the results indicate. Loneliness also was associated with functional decline, including participants being more likely to experience decline in activities of daily living (24.8 percent vs. 12.5 percent), develop difficulties with upper extremity tasks (41.5 percent vs. 28.3 percent) and difficulty in stair climbing (40.8 percent vs. 27.9 percent).

"Loneliness is a common source of suffering in older persons. We

demonstrated that it is also a risk factor for [poor health](#) outcomes including death and multiple measures of [functional decline](#)," the authors comment.

The authors conclude their study could have important public health implications.

"Assessment of loneliness is not routine in clinical practice and it may be viewed as beyond the scope of [medical practice](#). However, loneliness may be as an important of a predictor of adverse health outcomes as many traditional [medical risk](#) factors," the researchers note. "Our results suggest that questioning older persons about loneliness may be a useful way of identifying elderly persons at risk of disability and poor [health outcomes](#)."

In an invited commentary, Emily M. Bucholz, M.P.H., and Harlan M. Krumholz, M.D., S.M., of the Yale University School of Medicine, New Haven, Conn., write: "Social support – few concepts in epidemiology have proven more elusive to define."

"As we look forward to future studies on social support, the importance of clarifying the mechanisms by which this amorphous concept influences health becomes clear," they continue.

"Loneliness is a negative feeling that would be worth addressing even if the condition had no health implications. Nevertheless, with regard to health implications, scientists examining social support should build on studies such as those published in this issue and be challenged to investigate mechanisms as well as practical interventions that can be used to address the social factors that undermine health," the authors conclude.

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