

Cardiovascular diseases rise during Greek financial crisis

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Hospital admissions for cardiovascular diseases increased during the Greek financial crisis, according to two studies from Athens. The research was presented today at the Heart Failure Congress 2014, held 17-20 May in Athens, Greece. The Congress is the main annual meeting of the Heart Failure Association of the European Society of Cardiology.

Dr Alexis Samentzas said: "Greece plunged into an economic crisis in 2008 and since then there have been rises in unemployment, wage reductions and a fall in standard of living. Previous studies have shown that cardiovascular disease is more frequent during crises such as wars and natural disasters."

Dr Dimitra Papadimitriou said: "We noticed an increased incidence of atrial fibrillation (AF) and heart attack in younger patients in the emergency room during the Greek [financial crisis](#). Therefore, we decided to investigate whether there had been a real increase in cardiovascular diseases during the crisis."

The researchers retrospectively analysed all admissions to the cardiology department of Elpis General Hospital in Athens during two time periods. The first time period, 2003 to 2007, was defined as the pre-crisis period, while 2008 to 2012 was the crisis period.

Dr Samentzas said: "We chose 2008 as the start of the crisis because gross national product (GNP) markedly reduced that year. GNP is still at a lower level than it was prior to 2008 and unemployment has steadily

gone up."

The researchers recorded admissions for heart attacks (also referred to as acute myocardial infarction) and AF, the commonest heart rhythm disorder. They examined the results in younger patients and those without social insurance, and looked to see if there were differences between men and women.

The cardiology department received 3 420 admissions during the pre-crisis period and 3 860 during the crisis period. During the crisis period the number of admissions for heart attacks rose in both sexes but the finding was only statistically significant in women. Admissions also increased in people under the age of 45 years, but again the result was only statistically significant in women.

Dr Papadimitriou, first author of the heart attack study, said: "Younger women are thought to be protected against heart disease because oestrogens have a favourable effect in the cardiovascular system. During menopause, women's ischemic heart disease risk equals men's their age due to an oestrogen deficit."

She continued: "During the financial crisis, women's natural protection against [heart disease](#) may have been cancelled because of stress, which is an important factor in the development of heart attacks. This could explain the greater number of admissions for heart attacks in women when the crisis occurred."

AF admissions increased significantly in both sexes during the crisis, with an even greater rise in women. The climb in admissions was also seen in patients under 60 years old, with men being more susceptible.

Dr Samentzas, who led the AF study, said: "Previous studies have shown links between depression, anxiety, stress and AF. It is likely that Greek

people have become more stressed during the crisis as they have lost their jobs or had their salary decreased. The lack of money and decrease in quality of life may have led to happiness, self-esteem and satisfaction being replaced with distress, disappointment and anger. These negative emotions may have increased stress levels further and contributed to the rise in AF."

Admissions for AF doubled in patients (particularly women) with no social insurance while [heart attack](#) admissions increased in men and women without insurance, but the increase was statistically significant only in men. Dr Papadimitriou said: "We think there were more patients without [social insurance](#) during the crisis which is why there were more admissions. Unemployed people are less likely to pay for insurance."

She continued: "Our results highlight the importance of cardiovascular prevention during times of social distress. People with a lower quality of life due to the financial crisis tend to follow an unhealthy diet, have sedentary lifestyles and start or continue smoking as an escape from their problems."

Dr Samentzas concluded: "The upsurge in heart attacks and AF during the crisis are a wake-up call for doctors and health systems to advise patients how to live healthily and reduce their cardiovascular risk."

More information: Please see the details of the session here: [spo.escardio.org/SessionDetail ... 13505&subSessId=3306](http://spo.escardio.org/SessionDetail...13505&subSessId=3306)

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