

# Social isolation plus heart failure could increase hospitalizations, deaths

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Patients with heart failure who felt socially isolated were much more likely to die or be hospitalized than more socially connected patients, according to new research in *Journal of the American Heart Association*.

More than 6 million U.S. adults are estimated to have [heart failure](#) and that number continues to rise. In an earlier study, these researchers found that social isolation may increase the risk of depression and anxiety. However, little is known about the possible connection between [patients'](#) feelings of social isolation, risk of death and use of medical care.

In this study, researchers surveyed 1,681 patients (average age 73, mostly white, 53 percent men) about their sense of loneliness or isolation. All the patients—residents of 11 counties in southeastern Minnesota—had been diagnosed with heart failure between January 2013 and March 2015.

About 6 percent of the [heart failure patients](#) reported a high level of perceived social isolation. Researchers compared the heart failure patients reporting high perceived social isolation with those reporting low perceived social isolation. They found those in the high perceived social isolation group had:

- 3.7 times or more increased risk of death;
- 1.7 times increased risk of hospitalization; and
- 1.6 times higher risk of emergency department visits.

"Our study found a patient's sense of feelings of loneliness or [isolation](#), may contribute to poor prognosis in heart failure," said study senior author Lila Rutten, Ph.D., professor of health services research at the Mayo Clinic in Rochester, Minnesota. "Healthcare providers may aid their heart failure patients by implementing a valid, reliable and brief screening tool to help identify those who are experiencing [social isolation](#)."

This study may not apply to other populations, as it lacks racial and geographic diversity. There was also limited follow-up and patients who felt less socially isolated may have been more likely to respond.

**More information:** *Journal of the American Heart Association* (2018). [DOI: 10.1161/JAHA.117](https://doi.org/10.1161/JAHA.117)

Provided by American Heart Association

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