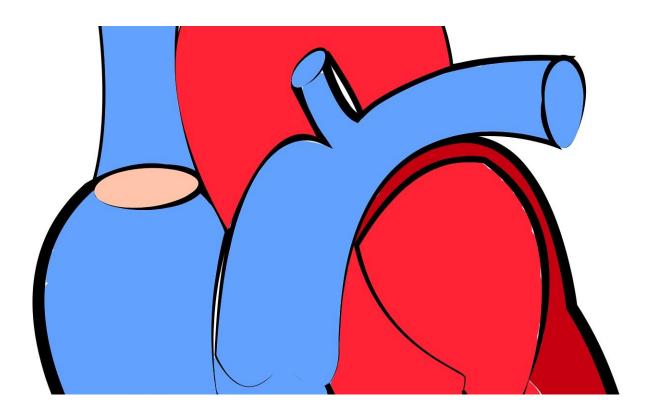


Loneliness is bad for the heart

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Loneliness is bad for the heart and a strong predictor of premature death, according to a study presented today at EuroHeartCare 2018, the European Society of Cardiology's annual nursing congress. The study found that feeling lonely was a stronger predictor of poor outcomes than living alone, in both men and women.



"Loneliness is more common today than ever before, and more people live alone," said Anne Vinggaard Christensen, study author and Ph.D. student, The Heart Centre, Copenhagen University Hospital, Denmark. "Previous research has shown that loneliness and social isolation are linked with coronary <u>heart disease</u> and stroke, but this has not been investigated in <u>patients</u> with different types of cardiovascular <u>disease</u>."

The study investigated whether poor social network was associated with worse outcomes in 13,463 patients with ischaemic <u>heart</u> disease, arrhythmia (abnormal heart rhythm), heart failure, or heart valve disease. Data from national registers was linked with the DenHeart survey, which asked all patients discharged from April 2013 to April 2014 from five heart centres in Denmark to answer a questionnaire about their physical and mental <u>health</u>, lifestyle factors such as smoking, and social support.

Social support was measured using registry data on living alone or not, and survey questions about feeling lonely—Do you have someone to talk to when you need it? Do you feel alone sometimes even though you want to be with someone? "It was important to collect information on both, since people may live alone but not feel lonely while others cohabit but do feel lonely," explained Ms Vinggaard Christensen.

Feeling lonely was associated with poor outcomes in all patients regardless of their type of heart disease, and even after adjusting for age, level of education, other diseases, body mass index, smoking, and alcohol intake. Loneliness was associated with a doubled mortality risk in women and nearly doubled risk in men. Both men and women who felt lonely were three times more likely to report symptoms of anxiety and depression, and had a significantly lower quality of life than those who did not feel lonely.

"Loneliness is a strong predictor of premature death, worse mental health, and lower quality of life in patients with cardiovascular disease,



and a much stronger predictor than living alone, in both men and women," said Ms Vinggaard Christensen.

Ms Vinggaard Christensen noted that people with poor social support may have worse health outcomes because they have unhealthier lifestyles, are less compliant with treatment, and are more affected by stressful events. But she said: "We adjusted for lifestyle behaviours and many other factors in our analysis, and still found that loneliness is bad for health."

She concluded: "We live in a time when <u>loneliness</u> is more present and health providers should take this into account when assessing risk. Our study shows that asking two questions about <u>social support</u> provides a lot of information about the likelihood of having poor health outcomes."

European guidelines on cardiovascular prevention state that people who are isolated or disconnected from others are at increased risk of developing and dying prematurely from coronary artery disease. The guidelines recommend assessment of psychosocial risk factors in patients with established cardiovascular disease and those at high risk of developing <u>cardiovascular disease</u>.

More information: The abstract 'Poor social network is associated with impaired self-rated health and symptoms of anxiety and depression across cardiac diagnoses' will be presented during the <u>Oral abstract</u> <u>session: PPCI</u>, risk factors and prevention which takes place on 9 June from 14:00 to 15:30 CEST in the Davis Theatre.

Provided by European Society of Cardiology

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