

Stress may raise type 2 diabetes risk in women

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Traditional risk factors like obesity, high blood pressure and a sedentary



lifestyle may not be the only predictors of type 2 diabetes. New research points to the role that stress may play in the development of the condition in women.

The study, being presented Nov. 10 at the American Heart Association's Scientific Sessions conference in Chicago, found that mounting <u>stress</u> from traumatic events, as well as long-term situations at home or work, was associated with an almost two-fold higher risk of new type 2 diabetes cases among older women.

"Psychosocial stressors as risk factors for diabetes should be taken as seriously as other embraced diabetes risk factors," said Jonathan Butler, the study's lead researcher and a postdoctoral scholar at the University of California, San Francisco's Center for the Study of Adversity and Cardiovascular Disease.

Diabetes is a major public <u>health</u> issue, affecting an estimated 30.3 million Americans as of 2015, according to the latest data from the Centers for Disease Control and Prevention. Among those people, 12 million are 65 and older.

"As older women increasingly represent a higher proportion of our population, we need to better understand risk factors for diabetes in this group," said Butler.

Diabetes is a chronic disease where the body can't regulate blood sugar properly. Too much glucose in the blood can lead to a host of health problems, including heart disease, stroke and kidney disease. While family history and age can play a role, factors such as high cholesterol, high blood pressure, obesity and physical inactivity make people more susceptible to type 2 diabetes.

However, researchers are beginning to look beyond just physiological



risk factors.

"We've been trying to understand the relationship between stress, mental health and diabetes risk for a while," said Dr. Sherita Hill Golden, professor of medicine at the Johns Hopkins University School of Medicine in Baltimore. Emerging evidence suggests that psychosocial stress and how people cope with stress may impact cardiometabolic health.

Previous studies on stress and diabetes have focused on individual stressors, such as work or symptoms of depression or anxiety. Others have only looked at snapshots in time. So, Butler and his colleagues set out to understand the joint relationship of multiple stressors with diabetes risk among women over time.

Researchers included data on 22,706 female health professionals participating in the Women's Health Study who did not have heart disease and whose average age was 72. They collected information on acute and chronic stressors and then followed the women for an average of three years. Acute stress included negative and traumatic life events, whereas chronic stress was related to work, family, relationships, finances, neighborhood and discrimination.

Women with the highest levels of acute and chronic stress had nearly double the risk for diabetes.

The next steps will be to confirm the findings and identify strategies targeted at psychosocial stressors that might decrease diabetes risk in older women, said Dr. Michelle A. Albert, the study's senior author and a professor of medicine at the University of California, San Francisco.

"From a public health perspective, health care providers should inquire about psychosocial stressors as part of their assessment of diabetes risk,"



she said.

For now, Golden said the new research highlights the importance of considering the role of non-traditional <u>risk factors</u> such as stress in the development of diabetes.

"We know that lifestyle intervention works for <u>diabetes</u> prevention, but that can be challenging if people experience cumulative stressors, like losing a job or caring for a family member, that hinder them from engaging in healthy behaviors like exercising, eating right or smoking cessation," she said. "It's important to assess and understand a patient's social history. They may need a referral to a counselor or social worker."

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