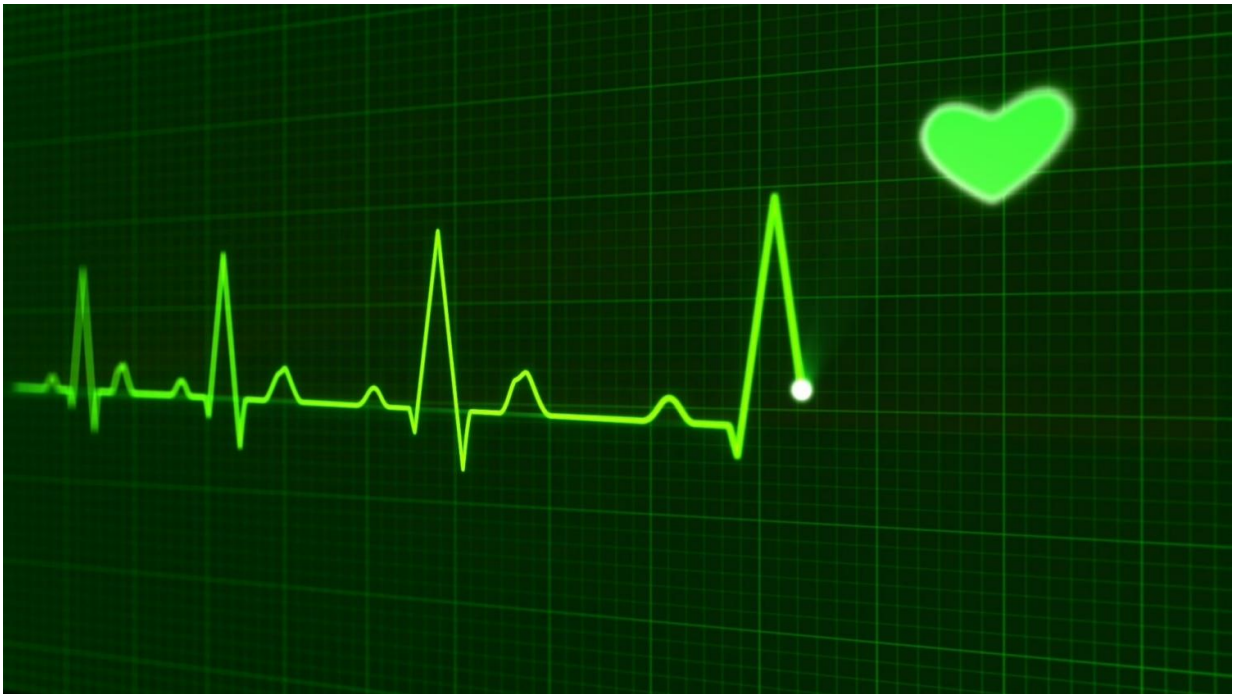


Higher economic status does not always translate to better heart health

April 28 2020



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Upward income mobility is associated with a trade-off between well-being and cardiometabolic health, according to new research published today in the *Journal of the American Heart Association*, an open access journal of the American Heart Association. The article appears in a special spotlight issue exploring different aspects of the complex relationships between psychosocial factors and cardiovascular health.

To study [cardiometabolic health](#), the research focused on [metabolic syndrome](#), which is a collection of signs that predispose individuals to later diabetes, stroke and heart attack. These signs include abdominal fat, [high blood pressure](#), elevated [cholesterol levels](#) and high blood glucose.

Researchers from Northwestern University and the University of Georgia analyzed data from two multi-decade studies: 7,542 participants in the National Longitudinal Study of Adolescent Health and 1,877 participants in the Midlife in the United States Study. The participants entered the studies as youth and were followed into adulthood. They grouped participants into one of four categories based on their family income during childhood and adulthood: those who were consistently advantaged or consistently disadvantaged, and those who experienced upward or downward mobility (meaning higher or lower income in adulthood relative to childhood).

Researchers' key conclusions:

- Upwardly mobile participants reported substantially less [psychological distress](#) than consistently disadvantaged individuals. In fact, in most comparisons their distress levels were comparable to consistently advantaged participants.
- However, this pattern was reversed for metabolic syndrome: upwardly mobile participants fared worse than those with consistent advantage and closely resembled individuals with consistent disadvantage.
- Because high socioeconomic status is associated with fewer health problems, it is commonly believed that as people's financial conditions improve, so will their health. However, these results suggest upward mobility entails a trade-off, where improving financial conditions forecast higher psychological well-being, but worse cardiometabolic health.
- Upward mobility is not always beneficial for cardiometabolic

health, even if it improves economic standing and mental health.

Study coauthors, disclosures and funding sources are detailed in the manuscript.

Provided by American Heart Association

Citation: Higher economic status does not always translate to better heart health (2020, April 28)
retrieved 5 May 2024 from

<https://medicalxpress.com/news/2020-04-higher-economic-status-heart-health.html>

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