

Getting fired during a pandemic could break your heart

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The COVID-19 pandemic-induced recession and rising unemployment may increase the occurrence of heart disease in New Zealand, particularly in middle-aged men.



Dr. Nhung Nghiem, an economist and modeler from the University of Otago, Wellington, and her colleagues, Dr. Anja Mizdrak and Professor Nick Wilson, analyzed <u>research papers</u> published since 2000 on the association between unemployment and economic crises, and heart disease.

Most of the studies found that increases in unemployment were connected with an increase in heart disease and death, especially for middle-aged men. The evidence also showed an association between chronic psychosocial stress and high-blood pressure, a known risk factor for heart disease.

"It is clear that involuntary unemployment causes stress and forces most people to lower their standard of living. Being in a less financially secure position and living in a deprived area are also risk factors for heart disease."

She says the wage subsidies and job creation programs introduced by the New Zealand government in response to the pandemic have been positive moves—but more might need to be done to prevent unemployment rising further.

Dr. Mizdrak says the government could minimize the impact rising unemployment is having on heart disease by reducing other key risk factors for the condition.

"The government could accelerate moves to make New Zealand smokefree by 2025, introduce regulations to reduce the level of salt and saturated fat in processed food and improve the uptake of preventive medications, including cholesterol-lowering statins and treatments for high blood pressure."

Dr. Nghiem says heart disease disproportionately affects Māori, Pacific,



South Asian peoples and low-income New Zealanders.

"Māori and Pacific peoples are also over represented in the groups who are on low incomes and in occupations vulnerable to economic shocks that trigger unemployment."

Dr. Mizdrak comments: "The government needs to address both <u>unemployment</u> and <u>heart disease</u> if they are to reduce health inequities in this country."

Provided by University of Otago

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