

Exhaustion linked with increased risk of heart attack in men

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3D Model of the heart by Dr. Matthew Bramlet. Credit: NIH

Men experiencing vital exhaustion are more likely to have a heart attack, according to research presented today at ESC Acute CardioVascular Care 2021, an online scientific congress of the European Society of

Cardiology (ESC). The risk of a myocardial infarction linked with exhaustion was particularly pronounced in never married, divorced and widowed men.

"Vital exhaustion refers to excessive fatigue, feelings of demoralisation and increased irritability," said study author Dr. Dmitriy Panov of the Institute of Cytology and Genetics, Novosibirsk, Russian Federation. "It is thought to be a response to intractable problems in people's lives, particularly when they are unable to adapt to prolonged exposure to psychological stressors."

This study examined the relationship between vital exhaustion and the risk of myocardial infarction in men with no history of cardiovascular disease. The study used data from the World Health Organization (WHO) MONICA Project. A representative sample of 657 men aged 25 to 64 years in Novosibirsk was enrolled in 1994.

Symptoms of vital exhaustion were assessed at baseline using the Maastricht Vital Exhaustion Questionnaire adopted by the MONICA protocol. Participants were classified according to their level of vital exhaustion: none, moderate, or high. Participants were followed-up for 14 years for the incidence of heart attack.

Overall, two-thirds (67%) of the men had vital exhaustion (15% had a high level and 52% had a moderate level) while 33% were unaffected. Nearly three-quarters (74%) of men with high blood pressure had vital exhaustion—high in 58% and moderate in 16%.

In the overall group of men, the researchers analysed the association between vital exhaustion at baseline and the risk of having a heart attack. Compared to those without vital exhaustion, men with moderate or high levels had a 2.7-fold greater risk of a heart attack within five years, a 2.25 higher risk within 10 years, and a 2.1 raised risk within 14 years (p

for all

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