Living alone raises Americans' cancer risk by nearly a third

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People who live alone have a greater risk of dying from cancer, a new

study warns.

Researchers from the American Cancer Society showed that U.S. adults who live alone had a 32% higher risk of cancer death than those who live with others. For men that was even higher, at 38% greater risk, while women living alone had a 30% higher risk.

The data was particularly concerning for middle-aged adults, those ages 45 to 64, who had a 43% higher risk of cancer death than those living with others.

"Previous studies have shown an association between living alone and cancer mortality, but findings by sex and race/ethnicity have generally been inconsistent, and data by socioeconomic status are sparse," said study author Hyunjung Lee, principal scientist in cancer disparity research at the American Cancer Society.

"Findings in this study underscore the significance of addressing living alone in the general population and among cancer survivors and call for interventions to reduce adverse effects of living alone and social isolation," she said in a society news release.

Researchers studied this using data from 1998 to 2019 for more than 473,000 adults from the U.S. National Health Interview Survey linked to the National Death Index. The data was followed for up to 22 years to calculate the association between living alone and cancer death.

About 38 million households lived alone in 2020, according to the report. That was up from just 7 million solo households in 1960.

Adults living alone were more likely to be older, male, white or Black, have incomes below the federal poverty level, have serious psychological distress or severe obesity, smoke cigarettes and consume alcohol.

The association between living alone and cancer death risk was also stronger among white adults and adults with higher education levels than for racial/ethnic minorities and adults with lower education, the study found.

The findings were published Oct. 19 in the journal *Cancer*.

These results may suggest that stronger social support from the community among racial/ethnic minorities and people of lower socioeconomic status may have eased the association between living alone and cancer death in those groups.

"These results reflect the need for more resources and appropriate training for clinicians, integrated screening for living alone and social isolation, and more research to identify and implement interventions that could reduce adverse effects of living alone and social isolation," Lee said.

"Some examples include patient navigation programs for this population to increase uptake of and adherence to cancer screening, timely diagnosis, treatment, and attendance of medical appointments, and the inclusion of this group among high priority groups for services based on screenings for the health-related social needs."

  More information: The U.S. Centers for Disease Control and Prevention has more on loneliness and health.