

Study finds high-income earners at lower risk of dying from stroke

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High-income earners have a 32% lower risk of dying after a stroke compared to low-income earners. The equivalent for high education is 26% lower risk. The differences in stroke survival linked to

socioeconomics are striking, according to a study at the University of Gothenburg.

The results will be presented on Wednesday at the [European Stroke Conference ESOC 2024](#) in Basel, Switzerland. Katharina Stibrant Sunnerhagen, Professor of Rehabilitation Medicine at the Sahlgrenska Academy at the University of Gothenburg, and the lead researcher behind the study, will be present.

The register-based study analyzed data from 6,901 [stroke patients](#) at Sahlgrenska University Hospital in Gothenburg. The aim was to investigate the influence of what are called social determinants of health on stroke survival.

Four factors were in focus: place of residence, country of birth, education and income. Disadvantageous factors included living in an area classified by the authorities as a vulnerable area, risk area or particularly vulnerable area, being born outside Sweden or Europe, having a short education and low income.

A matter of life and death

In addition to the association between income, education and stroke survival, the study shows a worrying trend in the combined effect of various factors. With one disadvantageous factor, the risk of death after a stroke was 18% higher, and with two to four disadvantageous factors it was 24% higher, compared with no disadvantageous factors.

"This shows the reality that an individual's socio-economic situation can be a matter of life and death within the context of stroke, especially when several disadvantageous factors come into play," says Sunnerhagen.

The study also found an association between increased risk of death after stroke and additional risk factors such as physical inactivity, diabetes, alcohol abuse and atrial fibrillation. Clear gender differences also emerged when the characteristics of patients were studied.

Among those with no disadvantageous social determinants of health, 41% were women, while women made up 59% of the group with two to four disadvantageous factors. In the latter group, smokers and former smokers were also overrepresented.

More health equity and better health

"The number of people suffering from stroke in Europe is expected to increase, making the need for effective interventions more important than ever. Targeted strategies are crucial, [policy makers](#) need to tailor legislation and consider specific circumstances and needs in different parts of society, while [health care providers](#) should consider identifying patients at higher risk of fatality from stroke," says Sunnerhagen.

"By addressing disparities, we will not only support the principles of health equity, but also have the opportunity to significantly improve overall public health," she concludes.

More information: Study: A register-based study on associations between stroke mortality and risk factors including social determinants of health. ([Presentation at ESOC 2024, the European Stroke Organisation Conference, Basel, Schweiz](#))

Provided by University of Gothenburg

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