

# Poor social health a predictor for cardiovascular disease

December 14 2021

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A recent study by Monash University has found that among healthy older adults, social isolation and low social support are strong predictors of overall cardiovascular risk.

Researchers observed that healthy older adults reporting [social isolation](#)

were 66 percent more likely to experience a cardiovascular (CVD) event and those with low [social support](#) were at twice the risk, compared to those reporting positive social [health](#), providing insights that may assist with CVD prevention strategies.

This risk of CVD was unchanged after accounting for known CVD risk factors of age, gender, tobacco smoking, [systolic blood pressure](#), high-density lipoprotein (HDL), non-HDL, diabetes, serum creatinine, and antihypertensive drug use.

The study is a new analysis of social and [clinical data](#) from the ASPirin in Reducing Events in the Elderly (ASPREE) trial and ALSOP\* sub-study, incorporating 11,498 relatively healthy Australian men and women over the age of 70 across an average of 4.5 years. Over this time researchers recorded 487 nonfatal and 83 fatal cardiovascular (CVD) events, such as [heart disease](#), heart attack and stroke.

Social isolation was defined as engaging in community activities less than once per month and having contact with four or fewer relatives and close friends a month. Social support was defined as having four or more relatives or close friends with whom private matters could be discussed, or be called upon for help. Loneliness was defined as feeling lonely three or more days per week.

These definitions could be considered as a starting point to defining cut-offs among healthy older adults to prevent CVD, much like the unhealthy systolic blood pressure cut-off of more than 120 mm/Hg.

The findings are now published in *BMC Geriatrics*.

Cardiovascular disease is the leading cause of morbidity and mortality worldwide and carries a high economic burden, as does poor social health. In Australia, the estimated economic cost of loneliness is

AUD\$1.7 billion through absenteeism, caring, lost productivity and employee turnover.

However, this estimate does not take into account the additional burden from poor social health on the health care system through more general practitioner visits, medication use, accident and emergency service use, outpatient appointments, hospital stays, and nursing home admission.

First author, Dr. Rosanne Freak-Poli from the Monash School of Public Health and Preventive Medicine and a Heart Foundation Postdoctoral Fellow, said to reduce the significant health and economic burden associated with CVD, prevention can be improved by identifying and intervening upon factors that increase the risk of CVD.

"To develop effective preventive interventions and guide cost-effective policy, a clear understanding of the extent to which social isolation, social support, and loneliness each influence CVD is required and how social health measures interact is important for identifying the most [vulnerable populations](#) for intervention," says Dr. Freak-Poli.

"The aging population presents a challenge of supporting older adults to maintain a healthy, fulfilling, independent and community-dwelling life for longer."

Heart Foundation interim CEO, Professor Garry Jennings, said the research reinforces the need to consider how social health may impact the risk of heart, stroke and blood vessel disease in older Australians.

"Family and social support or connection with the community are not always constants in people's lives. As our understanding of the role these factors play in cardiovascular health grows, so must our efforts to address them by helping older Australians stay connected and well supported," says Professor Jennings.

The ASPREE trial participants included in this analysis also participated in the ASPREE longitudinal study of older persons (ALSOP) substudy.

"Social isolation, social support and loneliness as predictors of cardiovascular disease incidence and mortality" is published in *BMC Geriatrics*.

**More information:** Social isolation, social support and loneliness as predictors of cardiovascular disease incidence and mortality. *BMC Geriatrics*. [DOI: 10.1186/s12877-021-02602-2](https://doi.org/10.1186/s12877-021-02602-2)

Provided by Monash University

Citation: Poor social health a predictor for cardiovascular disease (2021, December 14) retrieved 4 July 2023 from <https://medicalxpress.com/news/2021-12-poor-social-health-predictor-cardiovascular.html>

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