

Heart Disease a 'Silent Killer' in Patients With Severe Mental Illness

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A large new study confirms that people with severe mental disorders -- such as schizophrenia or other psychotic disorders -- are 25 percent to 40 percent more prone to die from heart disease than people without mental illness are.

Moreover, smoking and physical inactivity — behaviors that individuals potentially can change — significantly contribute to this increased risk of death, found researchers led by Amy Kilbourne, Ph.D.

They looked at results from the 1999 Large Health Survey of Veteran Enrollees in conjunction with the VA's National Psychosis Registry and the National Death Index of the Centers for Disease Control and Prevention (CDC). Including responses from more than 147,000 veterans, the study is the largest of its kind to ever take place. Most of the respondents were men and about two-thirds were 50 or older.

Kilbourne, associate director of the VA Ann Arbor National Serious Mental Illness Treatment Research and Evaluation Center in Michigan, and colleagues from Dartmouth Medical School conducted the study, which appears in the November-December issue of the journal *General Hospital Psychiatry*.

Patients with mental disorders who also had a diagnosis of diabetes — a known risk factor for [heart disease](#) and a side effect of some antipsychotic medications — were at high risk for heart disease-related mortality, as were patients with a diagnosis of dementia.

Smoking and lack of exercise, both common behaviors in people with mental disorders, contributed to the heart disease-related deaths considerably.

“These are devastating illnesses that lead to a lot of functional impairment, so many of these individuals have difficulty staying motivated to exercise to begin with, or finding places where they feel comfortable exercising,” Kilbourne said.

However, even when considering factors such as diabetes and lifestyle, researchers found that patients with schizophrenia or other psychotic disorders were still more likely to die from heart disease. “This suggests that we are either missing some factor, or there is something inherent about having these disorders that puts patients at greater risk for heart disease-related mortality,” Kilbourne said.

Eric Goplerud, Ph.D., director of the Center for Integrated Behavioral Health Policy in Washington, said that results of this study and others suggest that people with serious mental illnesses are far less likely to receive medical screening and general preventive care. He said that lack of coordinated care has serious consequences: “Serving their mental needs in one stovepipe and their medical needs in another is probably associated with premature mortality.”

“The issue of cardiovascular disease in this population is huge,” Goplerud said. “As we look at national health reform, it is absolutely critical that people with [mental illness](#) and addictions be included — they are dying of preventable medical conditions.”

More information: Kilbourne AM, et al. Excess heart-disease-related mortality in a national study of patients with mental disorders: identifying modifiable risk factors. *Gen Hosp Psychiatry* 31(6), 2009.

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