We examined the association between adulthood emotionality-activity-sociability temperament scale and preclinical atherosclerosis and, whether this association is mediated by cardiovascular risk factors (low-density lipoprotein cholesterol, systolic blood pressure, diastolic blood pressure and body-mass index (BMI)). The participants were a nationally representative sample of 537 men and 811 women from the Cardiovascular Risk in Young Finns study aged 15-30 years at the baseline in 1992 and aged 24-39 years at the follow-up in 2001. Carotid atherosclerosis was assessed by ultrasound scans of the common carotid artery intima-media thickness (IMT) and brachial flow-mediated dilation (FMD). In men, there was an association between the temperament dimension activity and IMT ($\beta = 0.08$, $p = 0.036$) which was partially mediated by BMI ($\beta$ decreased from 0.08 to 0.05; p-value of Sobel test = 0.002). However, after correction for multiple comparisons the association between IMT and the temperament dimension activity in men was only of borderline significance. In women, there were no associations between temperament and IMT or FMD. These results suggest that a highly active temperament may contribute to early signs of atherosclerosis in men and that body mass may mediate this association.
An ecologic analysis of psychosocial stress and heart disease in British Columbia.

https://arctichealth.org/en/permalink/ahliterature205705

Author: S J Elliott
A. Dean

Author Affiliation: Department of Geography, McMaster University, Hamilton, Ontario. elliotts@mcmail.cis.mcmaster.ca


Language: English

Publication Type: Article

Keywords: Adult
Age Factors
British Columbia - epidemiology
Cardiovascular Diseases - epidemiology - psychology
Chi-Square Distribution
Ecology
Female
Humans
Male
Marital status
Regression Analysis
Risk factors
Socioeconomic Factors
Stress, Psychological - complications

Abstract: Cardiovascular disease is the leading cause of death in Canada. However, much heart disease incidence cannot be explained by known risk factors, and evidence points to the potential role played by the psychosocial environment. This study involves an ecologic analysis exploring the relationships between psychosocial stress and ischaemic heart disease (IHD) in British Columbia. First, data from the Canada Health Promotion Survey correlated stress indicators (i.e., education, marital status) with self-reported stress levels. Results showed gender differences in stress. Stage II consisted of a multivariate analysis of ischaemic heart disease mortality in B.C. Results indicate a strong association between heart disease outcomes and educational background for both males and females. Findings of this study support a link between IHD and psychosocial factors. The results of the multiple regression must be interpreted with caution, given the use of an ecologic analysis. Additional research at the individual level is needed to fully understand these relationships.


PubMed ID: 9583258 View in PubMed

The association between burnout and physical illness in the general population--results from the Finnish Health 2000 Study.

https://arctichealth.org/en/permalink/ahliterature168523
Abstract: The association between burnout and physical diseases has been studied very little. The purpose of this study was to examine the relationship between burnout and physical illness in a representative nationwide population health study.

As a part of the "Health 2000 Study" in Finland, 3368 employees aged 30-64 years were studied. Burnout was assessed with the Maslach Burnout Inventory-General Survey. Physical diseases were diagnosed in a comprehensive health examination by research physicians.

Physical illness was more common among subjects with burnout than others (64% vs. 54%, P...
the management of patients with mood disorders and select comorbid medical conditions.

Author: Rajamannar Ramasubbu
        Valerie H Taylor
        Zainab Samaan
        Sanjeev Sockalingham
        Madeline Li
        Scott Patten
        Gary Rodin
        Ayal Schaffer
        Serge Beaulieu
        Roger S McIntyre

Author Affiliation: Department of Psychiatry and Clinical Neurosciences, University of Calgary, Hotchkiss Brain Institute, Calgary, Alberta, Canada. rramasub@ucalgary.ca


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Keywords: Adult
          Advisory Committees
          Antidepressive Agents - therapeutic use
          Canada
          Cardiovascular Diseases - epidemiology - psychology
          Cerebrovascular Disorders - epidemiology - psychology
          Chronic Disease - epidemiology - psychology
          Comorbidity
          Epilepsy - epidemiology - psychology
          HIV Infections - epidemiology - psychology
          Hepatitis C - epidemiology - psychology
          Humans
          Migraine Disorders - epidemiology - psychology
          Mood Disorders - epidemiology - therapy
          Multiple Sclerosis - epidemiology - psychology
          Neoplasms - epidemiology - psychology
          Osteoporosis - epidemiology - psychology
Abstract: Medical comorbidity in patients with mood disorders has become an increasingly important clinical and global public health issue. Several specific medical conditions are associated with an increased risk of mood disorders, and conversely, mood disorders are associated with increased morbidity and mortality in patients with specific medical disorders.

To help understand the bidirectional relationship and to provide an evidence-based framework to guide the treatment of mood disorders that are comorbid with medical illness, we have reviewed relevant articles and reviews published in English-language databases (to April 2011) on the links between mood disorders and several common medical conditions, evaluating the efficacy and safety of pharmacologic and psychosocial treatments. The medical disorders most commonly encountered in adult populations (ie, cardiovascular disease, cerebrovascular disease, cancer, human immunodeficiency virus, hepatitis C virus, migraine, multiple sclerosis, epilepsy, and osteoporosis) were chosen as the focus of this review.

Emerging evidence suggests that depression comorbid with several medical disorders is treatable and failure to treat depression in medically ill patients may have a negative effect on medical outcomes.

This review summarizes the available evidence and provides treatment recommendations for the management of comorbid depression in medically ill patients.

PubMed ID: 22303525 View in PubMed

[Clinico-epidemiological characteristics of elderly patients with cardiovascular diseases comorbid with depression (results of a multicenter prospective trial COORDINATA)].
https://arctichealth.org/en/permalink/ahliterature159677
Author: G V Pogosova
L V Romasenko
Source: Ter Arkh. 2007;79(10):79-82
Date: 2007
Language: Russian
Publication Type: Article
Keywords: Aged
Aging - psychology
Antidepressive Agents, Tricyclic - administration & dosage - adverse effects - therapeutic use
Cardiovascular Diseases - epidemiology - psychology
Depression - drug therapy - epidemiology - psychology
Humans
Middle Aged
Prospective Studies
Russia - epidemiology
Thiazepines - administration & dosage - adverse effects - therapeutic use
Treatment Outcome
PubMed ID: 18154152 View in PubMed

Downsizing of staff is associated with lowered medically certified sick leave in female employees.
https://arctichealth.org/en/permalink/ahliterature71262
AIM: To determine whether changes in number of staff in work sites are associated with medically certified sick leave among employees with an increased risk of developing cardiovascular disease. METHODS: The 5720 employees (aged 18-65) were from the WOLF study of cardiovascular risk factors in working men and women in greater Stockholm during the years 1992-95. From the medical examination a cardiovascular score was calculated for each participant. The WOLF study base was linked to a Statistics Sweden registry of economic and administrative activities. Sick leave spells lasting for at least 15 days during the calendar year following downsizing/expansion were identified for each subject. RESULTS: In multiple logistic regression an increased likelihood of having no medically certified sick leave (15 days or more) was found in women during the year following both downsizing and expansion. These analyses were adjusted for age and cardiovascular score. A high cardiovascular risk score reduced the likelihood of having no medically certified sick leave. The inclusion of psychosocial work environment variables did not change the results markedly. Separate analyses of women with and without high cardiovascular score showed that downsizing had a more pronounced effect on reduced long term sick leave among those with high than among those without low cardiovascular score. There were no consistent findings in men. CONCLUSIONS: There is evidence of a reduction of long term sick leave in women after downsizing and this is particularly evident among those with high cardiovascular score.
Effect of stress at work on the risk of cardiovascular diseases among the population of 25-64 years in Russia/Siberia (WHO program "MONICA-psychosocial").

https://arctichealth.org/en/permalink/ahliterature300439

Author: V V Gafarov
    E A Gromova
    D O Panov
    I V Gagulin
    A V Gafarova

Author Affiliation: Interdepartmental Laboratory for Epidemiology of Cardiovascular Diseases, Novosibirsk, Russia.


Date: Mar-04-2019

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    Female
    Humans
    Male
    Middle Aged
    Prevalence
    Prospective Studies
    Risk factors
    Russia - epidemiology
    Siberia
    Stress, Psychological
    Stroke
    Workplace

Abstract: The aim of the study was to determine the impact of stress on work on the risk of cardiovascular disease over a 16-year period in an open population of 25-64 years in Russia/Siberia.

A random representative sample of the population of both sexes of 25-64 years old in Novosibirsk in 1994 (men: n=657, 44.3±0.4 years, response - 82.1%, women: n=689, 45.4±0.4 years, response - 72.5%). The screening survey program included: registration of socio-demographic data, determination of stress at work (Karazek scale). The period of prospective follow-up of participants was 16 years. The study identified the following "end points": the first cases of myocardial infarction (MI), stroke.

A high level of stress at work was in 29.5% of men and 31.6% of women, the average level in 48.9% of men and 50.7% of women (χ²=2.574, ?=2, p=0.276). The risk of developing MI for a 16-year period, among people experiencing stressful situations at work, was: in men, HR=3.592, and women HR=3.218 (95% CI 1.146-9.042); stroke risk - among men, HR=2.603 (95% CI 1.06-4.153) in women HR=1.956 (95% CI 1.008-3.795). In multivariate analysis, in men with stress at work, the risk of MI among men was HR=1.15 (95% CI 0.6-2.2), among women - HR=2.543 (95% CI 1.88-7.351); risk of stroke, was in men, HR=3.8 (95% CI 1.6-8.8), in women - HR=1.95 (95% CI 0.984-3.887). The risk of stroke was higher among single, divorced and widowed men, HR=4.2 (95% CI 1.5-13.2), and in women with secondary or primary education, HR=3 (95% CI 0.852-11.039).

It was established that a high level of stress at work is not gender-specific; the risk of developing MI over a 16-year period is higher in women than in men, stroke in men; the risk of myocardial infarction and stroke in both sexes is affected by the social gradient.

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Gender Differences of Behavioral Risk Factors in Saint-Petersburg Inhabitants.  
https://arctichealth.org/en/permalink/ahliterature270140  

Author:  
A V Orlov  
O P Rotar  
M A Boyarinova  
A S Alieva  
E A Dudorova  
E P Kolesova  
E V Moguchaya  
N A Paskar  
V N Solntsev  
E A Baranova  
A O Konradi  

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Life Style  
Male  
Middle Aged  
Morbidity - trends  
Retrospective Studies  
Risk Assessment - methods  
Risk factors  
Risk-Taking  
Russia - epidemiology  
Sex Factors  
Urban Population  

Abstract:  
In developed countries there are significant gender differences in lifetime expectancy that can be explained by behavioral risk factors (RF).  
The aim of our study was to estimate gender features of behavioral RF in general population of Saint-Petersburg, Russia.  

As a part of all-Russian epidemiology survey ESSE-RF a random sampling of 1600 Saint-Petersburg inhabitants (25-64 y.o.) stratified by age and sex was performed. All participants filled in the questionnaire. Anthropometry (weight, height, body-mass index (BMI), waist circumference (WC) and fasting blood-tests (lipids, glucose by Abbott Architect 8000 (USA)) were performed.  

There were examined 573 (36%) men and 1027 (64%) women. No gender differences in obesity were found according to BMI criteria--in 178 (31.2%) women and 352 (35.1%) men. Obesity was more often detected in females according to WC criteria: ATPIII--44.1 vs 30.3%; IDF 51.2 vs 66.4% (p...
Harsh physical punishment in childhood and adult physical health.

https://arctichealth.org/en/permalink/ahliterature108684

Author: Tracie O Afifi
Natalie Mota
Harriet L MacMillan
Jitender Sareen

Author Affiliation: Department of Community Health Sciences, University of Manitoba, Winnipeg, Canada. t_afifi@umanitoba.ca


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Arthritis - epidemiology - psychology
Cardiovascular Diseases - epidemiology - psychology
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Child Abuse - psychology - statistics & numerical data
Child Rearing - psychology
Chronic Disease - epidemiology - psychology
Cross-Sectional Studies
Family Conflict - psychology
Female
Health Status Indicators
Health Surveys
Humans
Likelihood Functions
Male
Manitoba
Mental Disorders - epidemiology - psychology
Middle Aged
Obesity - epidemiology - psychology
Odds Ratio
Personality Disorders - epidemiology - psychology
Punishment
Sex Factors
Statistics as Topic
Young Adult
Abstract: The use of physical punishment is controversial. No studies have comprehensively examined the relationship between physical punishment and several physical health conditions in a nationally representative sample. The current study investigated possible associations between harsh physical punishment (ie, pushing, grabbing, shoving, slapping, and hitting) in the absence of more severe child maltreatment (ie, physical abuse, sexual abuse, emotional abuse, physical neglect, emotional neglect, and exposure to intimate partner violence) and several physical health conditions.

Data were from the National Epidemiologic Survey on Alcohol and Related Conditions collected in 2004 and 2005 (n = 34,226 in the current analysis). The survey was conducted with a representative US adult population sample (20 years or older). Eight past year physical health condition categories were assessed. Models were adjusted for sociodemographic variables, family history of dysfunction, and Axis I and II mental disorders.

Harsh physical punishment was associated with higher odds of cardiovascular disease (borderline significance), arthritis, and obesity after adjusting for sociodemographic variables, family history of dysfunction, and Axis I and II mental disorders (adjusted odds ratios ranged from 1.20 to 1.30).

Harsh physical punishment in the absence of child maltreatment is associated with some physical health conditions in a general population sample. These findings inform the ongoing debate around the use of physical punishment and provide evidence that harsh physical punishment independent of child maltreatment is associated with a higher likelihood of physical health conditions.

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Health behaviors, waist circumference and waist-to-height ratio in children.
https://arctichealth.org/en/permalink/ahliterature135334

Author: R. Lehto
C. Ray
M. Lahti-Koski
E. Roos

Author Affiliation: Folkhälsan Research Center, Paasikivenkatu 4, Helsinki, Finland.


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Abstract: Waist circumference (WC) and waist-to-height ratio (WHtR) begin to gain attention as measures of adiposity and as important cardiometabolic disease risk factors also among children. Still, little research has been done on behavioral determinants of WC and WHtR in children. The purpose of this study was to examine associations between health behaviors, WC and WHtR in children.

The study was a cross-sectional study conducted in Swedish-speaking schools in Helsinki region in 2006. In all, 1146 children were recruited, from which 55% took part in the study. A total of 604 9-11-year-old children (312 girls, 292 boys) were measured by research staff and completed a study questionnaire on their health behaviors, including breakfast intake, TV viewing, sleep duration and physical activity, and a 16-item food frequency questionnaire. Covariance analysis was used as the statistical analysis method.

When controlling for other health behaviors, for example, irregular breakfast (B-coefficient 2.49 CI, 0.64-4.34; P...