

Study: Loneliness is a heartbreaker for diabetics

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This study looked at whether people with diabetes who were lonely or socially isolated were more likely to develop cardiovascular disease than those who were not. Photo by iStock.

“Do you have a best friend?”

That might not sound like an appropriate question for a doctor’s visit, but it may be a lifesaver. A new Tulane University [study](#) finds that loneliness is a bigger risk factor for heart disease in patients with diabetes than diet, exercise, smoking and depression.

The research was published in [*European Heart Journal*](#), a publication of the European Society of Cardiology.

“The quality of social contact appears to be more important for heart health in people with diabetes than the number of engagements,” said study author [Dr. Lu Qi](#), HCA Regents Distinguished Chair and Professor at Tulane University School of Public Health and Tropical Medicine. “We should not downplay the importance of loneliness on physical and emotional health. I would encourage patients with diabetes who feel lonely to join a group or class and try to make friends with people who have shared interests.”

Patients with diabetes are at greater risk of cardiovascular disease and are more likely to be lonely than their healthy peers. Previous studies have found that loneliness and social isolation are both related to a higher likelihood of cardiovascular disease in the general population. This study looked at whether diabetics who were lonely or socially isolated were more likely to develop cardiovascular disease than those who were not.

The study included 18,509 adults aged 37 to 73 years in the UK with diabetes but no cardiovascular disease. Loneliness and isolation were assessed with questionnaires. High-risk loneliness features were feeling lonely and never or almost never being able to confide in someone. High-risk social isolation factors were living alone, having friends and family visit less than once a month, and not participating in a social activity at least once per week.

The researchers looked at the association between loneliness, isolation and incidents of cardiovascular disease after adjusting for other health and lifestyle factors.

Over the next decade, 3,247 participants developed cardiovascular disease; 2,771 participants developed coronary heart disease and 701 experienced strokes (some patients had both). The risk of cardiovascular disease was 11 to 26 percent higher in those with the highest scores for loneliness compared to those with the lowest scores. Similar results were observed for coronary heart disease but the association with stroke was not significant. Social isolation scores were not significantly related to any of the cardiovascular outcomes.

The researchers also assessed the relative importance of loneliness, compared with other risk factors, on the incidence of cardiovascular disease. Loneliness showed a weaker influence than kidney function, cholesterol and BMI, but a stronger influence

than depression, smoking, physical activity and diet.

“Loneliness ranked higher as a predisposing factor for cardiovascular disease than several lifestyle habits. We also found that for patients with diabetes, the consequence of physical risk factors (i.e. poorly controlled blood sugar, high blood pressure, high cholesterol, smoking and poor kidney function) was greater in those who were lonely compared to those who were not,” Qi said. “The findings suggest that asking patients with diabetes about loneliness should become part of standard assessment, with referral of those affected to mental health services.”