
MOOD DISORDER IS ASSOCIATED WITH EXCESS CARDIOMETABOLIC HEALTH COMORBIDITIES AND CARDIOVASCULAR RISK FACTORS: CROSS-SECTIONAL STUDY USING DATA FROM THE UK BIOBANK DATASET

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INTRODUCTION

Individuals with serious mental illnesses experience poor physical health, particularly increased rates of cardiometabolic disorders. There are corresponding increases in premature mortality.

OBJECTIVES/AIMS

To assess the nature and extent of cardiometabolic risk factors and comorbidities in bipolar disorder and depression compared to controls.

METHODS

Cross-sectional analysis of records for 502,602 participants within the UK Biobank database. Mood disorder was identified using an internally developed algorithm. Presence of cardiometabolic conditions and risk factors was examined. Multinomial logistic regression analyses were applied.

RESULTS

Compared to controls, individuals with bipolar and depression were significantly more likely to smoke. Rates of smoking were particularly elevated in the bipolar group, with a RRR of 3.18 (95% CI 2.790-3.632) compared to controls.

Individuals with bipolar disorder or severe recurrent depression were significantly more likely to be underweight, and have classes I, II and III obesity. All mood disorders were significantly associated with Class II and Class III obesity.

Bipolar disorder was significantly associated with increased rates of hypertension, diabetes, MI, angina and stroke. Severe depression was also associated with an increased risk of hypertension, diabetes, angina and stroke and individuals with moderate depressive disorder showed increased rates of MI, angina and stroke. Rates of 'no cardiovascular illness' were significantly reduced across the mood disorder spectrum.

CONCLUSIONS

Individuals with mood disorder have significantly increased rates of both cardiovascular risk factors and cardiometabolic illness. These findings using a large and extensive national dataset highlight a significant health inequality.