Abstract 19600: Patients With Cardiovascular Risk Factors Were More Likely to Have Lower Life Satisfaction

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Abstract

Introduction: Five years after coronary angiography, life satisfaction (LS) among patients may be related to incidents of cardiovascular diseases, risk factors and unhealthy behaviours and socioeconomic conditions but their respective influence remains unclear. Our aim is to analyze LS and its relationships with those factors.

Methods: Among the 4,391 patients initially contacted, 547 deaths were reported and 209 had an invalid address. 3,635 patients who underwent coronary angiography in 2008-2009 at the National Institute of Cardiac Surgery and Cardiological Intervention (INCCI) in Luxembourg completed a self-questionnaire assessing LS [1–10] and other covariates. Data were analysed via multiple regression models adjusted initially on age, sex and income, and for a second time with the addition of all CVRF.

Results: LS of 1,289 volunteers (69.2 years) was 7.3/10. Most were men, Luxembourgish, employees and manual workers, had secondary education and an income of 36,000 euros or more per year. LS was lowest in female patients, those with a low to middle income. Patients who live in couple had the best LS. Patients with a history in the previous 5 years of physical inactivity (regression coefficient: −0.903), angina pectoris (rc −0.843), obesity (rc −0.512), diabetes, or hypercholesterolemia, were more likely to have lower LS. The previous associations were mostly maintained on the second analysis, with the exceptions of diabetes and obesity. In addition, patients who stopped smoking because of peer pressure (rc −0.011) had a lower LS.

Conclusions: Profiles of patients are linked with least LS: ‘inclined abstainers’ who intended to modify their behaviours, but could not do it, and ‘disinclined
abstainers’ who had no intention of changing and were insufficiently concerned to do so. Patients who stopped smoking and perceived it as unpleasant also had the lowest LS. ‘Declined actors’ were those patients who had to adjust their lifestyles, but were ambivalent about their intentions and the behaviour, which they continued. Health promotion programs would benefit from targeting factors that moderate the unfavourable intention–behaviour relationship and can help enhance LS.

Key Words:
- Quality of life
- Social determinants
- Risk factors

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