

## Letter to Editor

# Association Between Cardiovascular Disease and Depressive Symptoms in Advanced Age

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The lifetime prevalence of major depression in older adults is 16.52% and has become an increasingly important public health priority. Diagnosing depression in elderly individuals can be more challenging than in younger populations [1]. The manifestations of depression in the elderly tend to be more covert and may go unnoticed until the condition reaches a severe stage [2]. Cardiovascular Diseases (CVD) are a leading cause of global mortality. The co-occurrence of CVD and depression significantly reduces quality of life and leads to poor health outcomes and an increased risk of death. The mechanism underlying the association between depressive symptoms and increased risk of CVD is complex and is influenced by multiple factors, and is currently not fully understood [3]. The aim of this study was to explore the association between cardiovascular disease and depressive symptoms among advanced age population.

Our study is a longitudinal study based on data from China Health and Retirement Longitudinal Study (CHARLS). The CHARLS is a representative longitudinal survey of people aged  $\geq 45$  years. A total of 2338 participants were selected in this cohort study after excluding those aged below 70 years and

missing data on CVD and depressive symptoms. Our study collected basic information about the person (Age, sex, marital status, current drinkers, current smokers, and depressive symptoms). We used binary logistic regression to investigate the association between CVD and depressive symptoms in advanced age Chinese population. All statistical analyses were performed using SPSS.25. The study protocol was approved by the Ethical Review Committee of Peking University (approval number: IRB00001052–11,015). All participants provided informed consent before their inclusion in the study.

The average age of the participants was 79.2 years (SD=3.9), and of them, 47% were women. Of the patients, 1206 (52%) suffered from depressive symptoms and 774 (33.1%) suffered from CVD. The logistic regression analysis showed that in the unadjusted model, individuals with CVD exhibited a significantly increased odds of experiencing depressive symptoms compared to those without CVD (model 1: OR = 2.953, 95% CI = 2.846, 2.367). After adjusting for all potential confounders, the association between CVD and depressive symptoms retained its significance (model 3: OR = 2.901, 95% CI = 2.411, 3.491).

### Cardiovascular Disease and Depressive Sympt

Characteristic	Model 1			Model 2			Model 3		
	OR	95% CI	p-value	OR	95% CI	p-value	OR	95% CI	p-value
Cardiovascular disease									
No	1.000		<0.001	1.000		<0.001	1.000		<0.001
Yes	2.953	2.846, 2.367		2.846	2.367, 3.421		2.901	2.411, 3.491	

**Note:** OR: odds ratio; 95% CI: 95% confidence interval.

Model 1: Unadjusted model;

Model 2: Age, sex, and marital status;

Model 3: Model 2 + Current drinkers and Current smokers.

This study analysed the effect of depressive symptoms on the development of cardiovascular disease in advanced age population. Depressive symptoms has consistently shown to be associated with CVD in previous studies [4,5]. In a synthesis analysis of eight studies, Rutledge and colleagues discovered that experiencing depressive symptoms or having depressive disorders leads to a twofold increase in the risk of death or CVD events [6]. The key reason is that individuals with depression and CVD are unlikely to adhere to a nutritious diet, engage in consistent exercise, maintain medication compliance, or undergo comprehensive cardiac recovery. Due to the irreversible nature of CVD as a chronic condition. The extended treatment of medications can also result in economic challenges for patients. Simultaneously, the abrupt nature and severity of the illness can bring about psychological burdens for patients and may potentially induce symptoms of depression. Hence, providing timely health management and psychological counseling for individuals with cardiovascular diseases can alleviate apprehension and significantly impact the prognosis of cardiovascular conditions. Although further research about the drivers of this relationship is needed, these results could help to enhance the integrated management of individuals with depressive symptoms and the development of preventive strategies to reduce the effect and burden of cardiovascular disease.

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