Satisfaction with everyday life may protect against heart disease

While depression and anxiety have long been recognized as risk factors for heart disease, there is less certainty over the beneficial effects of a 'positive' psychological state. Now, following a study of almost 8000 British civil servants, researchers say that a satisfying life is indeed good for the heart (Boehm et al, 2011).

The civil servants – who were all members of the Whitehall II study cohort in the UK with an average age of 49 years – were questioned about seven specific areas of their everyday lives: love relationships, leisure activities, standard of living, job, family, sex, and one's self. They were asked to rate their satisfaction in each domain on a scale of 1 ('very dissatisfied') to 7 ('very satisfied'). Ratings for each domain were also combined to provide an average satisfaction score for their overall lives.

The participants' health records were then examined for coronary-related deaths, non-fatal heart attack and clinically verified angina over a follow-up period of around 6 years.

Results showed that higher levels of average life satisfaction were associated with a reduced (and statistically significant) risk of total coronary heart disease of 13% (hazard ratio 0.87; 95% confidence interval 0.78–0.98), after controlling for demographic and other health characteristics. An approximate 13% reduced risk of heart disease was also associated with satisfaction in four of the specific life domains – job, family, sex, and self (but not with love relationships, leisure activities, or standard of living). The reduced risk of total coronary heart disease was found in both men and women.

There was a 'dose response' in these associations such that those reporting the greatest average life satisfaction appeared to enjoy the greatest risk reduction in total coronary disease.

Commenting on the results, investigator Dr Julia Boehm from the Department of Society, Human Development, and Health, at the Harvard School of Public Health, Boston, USA, said: 'These findings suggest that interventions to bolster positive psychological states – not just alleviate negative psychological states – may be relevant among high-risk individuals.'

Boehm JK, Peterson C, Kivimaki M, Kubzansky LD (2011) Heart health when life is satisfying: evidence from the Whitehall II cohort study. *Eur Heart J* doi:10.1093/eurheartj/ehr203

Database supports improvement in hip fracture care

According to the National Hip Fracture Database National Report 2011 (NHS Information Centre, 2011) national clinical audit, supportive networks and extra payments for hospitals have delivered high quality, continuing improvements in hip fracture care.

Since its launch in 2007 the National Hip Fracture Database has supported and documented substantial improvements in the quality of care for patients. Around 70 000 older people in the UK sustain a hip fracture each year. Doctors say this approach provides a practical and achievable model that should now be followed more widely.

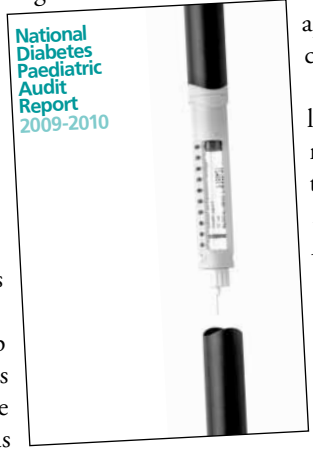
The report covers more than 53 000 cases admitted between April 2010 and March 2011, and shows consistent improvements in compliance with the six clinical standards measured.

Dr Colin Currie, consultant geriatrician from Edinburgh and chair of the National Hip Fracture Database implementation group, said: 'This report shows how a national audit addressing the care of a serious common injury can make a difference on a national scale.'

NHS Information Centre (2011) The National Hip Fracture Database National Report 2011. (www.nhfd.co.uk/ accessed 27 July 2011)

20 000 children with diabetes risk amputation and blindness

Diabetes UK warns that more than 85% of children and young people with diabetes (20 000) in England and Wales risk amputation and blindness in later life unless urgent steps are taken to help improve their diabetes management.



To help tackle this problem, the charity has issued a major research call for interventions to improve diabetes care and management, and is encouraging applications aimed at children.

According to the largest ever paediatric diabetes audit, the National Diabetes Paediatric Audit (NHS Information Centre, 2011), 85.5% of people with diabetes under 25 years of age have dangerously high blood glucose levels, putting them at increased risk of devastating long-term complications including blindness, amputation, heart disease and kidney failure.

The audit also shows that the highest proportion of people with dangerous blood glucose levels were those aged 12–24 years. In addition, only 498 out of 12 204 people in this age group (4%) received all the eight basic annual health checks including blood glucose, foot and eye checks.

Dr Tabitha Randell, Consultant in Paediatric Endocrinology and Diabetes at Nottingham Children's Hospital, said: 'Diabetes is difficult to deal with at any age, but it is particularly tricky during teenage years. ...We need to develop strategies to work with young people and their families to help support them through this and allow diabetes to be part of their lives rather than either ruling it out or pretending it is not there at all.'

NHS Information Centre (2011) National Diabetes Paediatric Audit Report 2009-2010. NHS Information Centre, Leeds (www.ic.nhs.uk/nda accessed 22 July 2011)