Spouses of people suffering a heart attack need care for increased risk of depression and suicide

Spouses of people who suffer an acute myocardial infarction have an increased risk of depression, anxiety or suicide after the event, even if their partner survives, according to new research (Fosbøl et al, 2012). The study also found that men were more susceptible to depression and suicide after their wife's survival or death from an acute myocardial infarction, than women.

Using Danish registries, researchers in the USA and Denmark compared 16 506 spouses of people who died from an acute myocardial infarction between 1997 and 2008 with 49 518 spouses of people who died from causes unrelated to acute myocardial infarction.

They also matched 44 566 spouses of patients who suffered a non-fatal acute myocardial infarction with 131 563 spouses of people admitted to hospital for a non-fatal condition unrelated to acute myocardial infarction. They looked at the use of antidepressants and benzodiazepines (used to treat anxiety) before and up to a year after the event, records of contact with the health system for depression, and suicide.

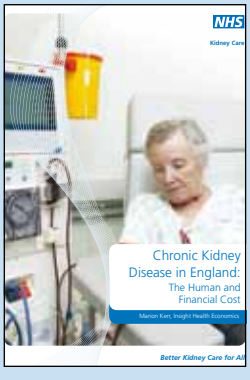
'We found that more than three times the number of people whose spouses died from an acute myocardial infarction were using antidepressants in the year after the event compared with the year before,' said first author, Dr Emil Fosbøl. 'In addition, nearly 50 times as many spouses used a benzodiazepine after the event compared to before. For people whose spouse had died from a non-acute myocardial infarction cause, we saw a much higher rate of medication use than for other causes and they had an approximately 50% higher likelihood of claiming a prescription for these drugs.'

He continued: 'Those whose spouse survived an acute myocardial infarction had a 17% higher use of antidepressants after the event, whereas spouses of patients surviving some other, non-acute myocardial infarction related condition had an unchanged use of antidepressants after the event compared to before.'

Fosbøl EL, Peterson ES, Weeke P et al (2012) Spousal depression, anxiety, and suicide after myocardial infarction. *Eur Heart J* Aug 21 (Epub ahead of print)

Chronic kidney disease in England costs over £1.4 billion

A health economics report released by NHS Kidney Care has found that chronic kidney disease costs the NHS in England more than £1.4 billion each year. This is more than the combined NHS spend on breast, lung, colon and skin cancer, according to *Chronic Kidney Disease in England: The Human and Financial Cost* (Kerr, 2012).



Nearly half of this sum is spent on renal replacement therapy, yet many people are not receiving help to tackle the disease in its earlier stages when it could prevent the need for expensive dialysis or transplant.

Around 1.8 million people in England have been diagnosed with chronic kidney disease, but there are thought to be about a million more people who have yet to be diagnosed.

The study also found that half a million people with chronic kidney disease were not tested in 2009–10 to see if they would benefit from angiotensin-converting enzyme inhibitors or angiotensin receptor blockers. Had they been, it estimates that a further 29 000 people might have been prescribed these drugs, which would improve health outcomes and save the NHS around £13 million a year.

Kerr M (2012) Chronic Kidney Disease in England: The Human and Financial Cost. www.kidneycare.nhs.uk/document.php?o=1291 (accessed 24 August 2012)

Obstructive sleep apnoea found in 50% of women

New research has found high rates of sleep apnoea in women, despite the condition usually being regarded as a disorder predominantly of males (Franklin et al, 2012).

The study also suggested that women with hypertension and/or obesity were more likely to experience sleep apnoea.

The incidence of obstructive sleep apnoea increases with age and it is considered more prevalent in men than in women. Researchers from Uppsala and Umeå University in Sweden investigated the frequency and risk factors of sleep apnoea in women.

The study analysed 400 women from a random sample of 10 000 women aged 20–70 years. The participants underwent a sleep examination and answered a questionnaire.

The results showed that obstructive sleep apnoea was present in 50% of women aged 20–70 years. The researchers also found links between age, obesity and hypertension: 80% of women with hypertension and 84% of obese women suffered from sleep apnoea. Severe sleep apnoea was present in 31% of obese women aged 55–70 years old.

Lead author Professor Karl Franklin said: 'We were very surprised to find such a high occurrence of sleep apnoea in women, as it is traditionally thought of as a male disorder. These findings suggest that clinicians should be particularly aware of the association between sleep apnoea and obesity and hypertension, in order to identify patients who could also be suffering from the sleeping disorder.'

Franklin KA, Sahlin C, Stenlund H, Lindberg E (2012) Sleep apnoea is a common occurrence in females. *Eur Respir J* Aug 16 (Epub ahead of print)