

Aging and Health Matters: Loneliness Puts Older Adults at Risk for Serious Medical Problems

[Announcer] This program is presented by the Centers for Disease Control and Prevention.

[Montrece Ransom] Loneliness and social isolation affect a significant number of older adults, putting them at greater risk for serious medical conditions including dementia and premature death.

A new report from the National Academies of Sciences, Engineering, and Medicine points out that more than one-third of adults in the U.S., aged 45 and older, feel lonely, and it's even higher for adults age 65 and older.

I'm in the studio today to discuss the report with CDC's Director of Population Health, Dr. Craig Thomas. Welcome, Dr. Thomas.

[Dr. Craig Thomas] Hi Montrece and thank you for having me.

[Montrece Ransom] Dr. Thomas, why is this report on loneliness and social isolation in older adults important?

[Dr. Craig Thomas] Well, human beings are social by nature, and high-quality relationships are vital for health and well-being. And, while the science of social relationships and their consequences on health have been documented for decades, the feelings of loneliness and social isolation remain an underrecognized risk to the public's health. I'd like to help change that.

[Montrece Ransom] What's the first thing you would do?

[Dr. Craig Thomas] I'd start by doing everything I can to increase awareness that this is a serious public health issue. Let's start by looking at the data on some of the health risks of social isolation. Among older adults, there's a 50% increase in risk for dementia, including the most concerning type—Alzheimer's disease. It also increases a person's risk of premature death. It's a health risk that rivals smoking, obesity, and physical inactivity. Loneliness is also associated with higher rates of depression, anxiety, and suicide.

[Montrece Ransom] I'm curious. What's the difference between loneliness and social isolation?

[Dr. Craig Thomas] A lot of people have asked me about that. It's important to note that social isolation and loneliness are two distinct aspects of social relationships, and they're not significantly linked. But, both can put health at risk. So, the best way to describe the difference is that loneliness is a subjective feeling of being alone—even when you're surrounded by people. I think most of us have felt that way at some point in our lives. Social isolation, on the other hand, is the lack of social relationships, particularly meaningful relationships. Both of these topics are viewed as social determinants of health, and for older adults, were associated with a 29% increased risk of heart disease and a 32% increased risk of stroke.

[Montrece Ransom] So, what are some of the causes of loneliness and social isolation in older adults?

[Dr. Craig Thomas] There are a number of risk factors for loneliness or social isolation. Older adults may be living alone. They may have lost a family member or friend. Or they may have chronic illnesses such as diabetes, heart disease, arthritis, or have had a stroke. Even hearing loss can be socially isolating.

[Montrece Ransom] The report highlights loneliness among vulnerable older adults including immigrants, minorities, and lesbian, gay, bisexual, and transgender populations. Would you talk about that?

[Dr. Craig Thomas] Certainly, the current evidence suggests that immigrants are more likely to experience social isolation and possibly loneliness than non-immigrants. First-generation Latinos, for example, experience stressors that can increase social isolation, such as language barriers, differences in community, family dynamics, and new relationships that lack depth or history.

LGBT populations tend to experience more loneliness or social isolation because of stigma and discrimination based on their sexual orientation.

[Montrece Ransom] Dr. Thomas, what can health care providers do to help?

[Dr. Craig Thomas] That's a good question. Providers are in a unique position to assess if a person in their care is lonely or socially isolated. Nearly all adults aged 50 and older interact with the health care system in some way. For those without social connections, a doctor's appointment or a visit from a home health nurse may be one of the few face-to-face encounters they have. Health care systems alone can't solve the problems of social isolation and loneliness, but they can help as part of a larger global effort to combat the health effects on their patients. Two tools shown to be effective for assessments are the Berkman-Syme Social Network Index and the UCLA Loneliness Scale. Both are recommended by the Academies' report.

[Montrece Ransom] What resources are available for people who may be feeling lonely or don't want to be socially isolated?

[Dr. Craig Thomas] CDC's Alzheimer's Disease and Healthy Aging Program has a number of easily-accessible resources on their website that address Loneliness and Social Isolation, including the Academies' report and links to organizations with tips for getting connected to community resources.

[Montrece Ransom] Thank you Dr. Thomas. For more information, listeners can go to B-I-T-dot-L-Y-slash-lonely adults. I've been talking today with CDC's Director of Population Health, Dr. Craig Thomas.

[Dr. Craig Thomas] Thank you Montrece.

[Announcer] For the most accurate health information, visit cdc.gov or call 1-800-CDC-INFO.