

For older adults, loneliness ups mortality after nonelective surgery

November 16 2022



For older adults undergoing nonelective surgery, loneliness is associated

with increased odds of death at 30 days, according to a research letter published online Nov. 16 in *JAMA Surgery*.

Mary R. Shen, M.D., from the Center for Healthcare Outcomes and Policy in Ann Arbor, Michigan, and colleagues examined whether loneliness is associated with postoperative mortality among a cohort of 4,453 [older adults](#) (mean age, 75.0 years) using data from the Health and Retirement Study linked to Medicare claims. Overall, 14.0 percent of the [patients](#) underwent nonelective surgery.

The mean loneliness score in the cohort was 1.5. The researchers found that the unadjusted 30-day mortality rate was 1.8 percent (0.9 and 7.4 percent in the elective and nonelective groups, respectively). Among patients undergoing [elective surgery](#), loneliness was not associated with higher odds of death at 30 days (odds ratio, 0.46; 95 percent confidence interval, 0.20 to 1.01; P = 0.053). However, loneliness was associated with higher odds of death at 30 days among patients undergoing nonelective surgery (odds ratio, 1.76; 95 percent confidence interval, 1.03 to 3.02; P = 0.04).

"The prevalence of [loneliness](#) among older individuals and its association with mortality after undergoing nonelective surgery highlights the need for enhanced postoperative support for these patients," the authors write.

One author disclosed financial ties to a health insurance company.

More information: Mary R. Shen et al, Association Between Loneliness and Postoperative Mortality Among Medicare Beneficiaries, *JAMA Surgery* (2022). [DOI: 10.1001/jamasurg.2022.4784](https://doi.org/10.1001/jamasurg.2022.4784)

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