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## Trends of smoking and alcohol consumption after acute myocardial infarction – a gerontological meta-analysis

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**Keywords:** alcohol, smoking, myocardial infarction

### *Aims*

The core aim of this conference presentation is to demonstrate how health behaviors of elderly social groups could be shifted by perceived social support (PSS) after acute myocardial infarction (AMI). More precisely, this presentation focuses on examining how elderly people could quit smoke and accept moderate alcohol consumption by PSS to improve their complex health conditions.

Nowadays, vivid discussions have been discerned in scientific circles about this topic. Numerous theoretical findings suggest that elderly people are unable to change their behavior, notwithstanding, empirical results have revealed that health behavior and attitude can be shifted in the last period of in their lifespan.

### *Method*

59 papers and book chapters were elaborated on by applying Preferred Reporting Items for Systematic Reviews and Meta-Analysis (PRISMA) guidelines. The scientific documents were selected and scrutinized from Science Direct, PsychINFO/ARTICLES, PubMed, Scopus, Wiley, and Web of Science.

## **Results**

International studies prove that more than half of patients with AMI do not quit smoking after a cardiovascular event. Höpner et al. (2020) find that recovery of German persistent smoker post-AMI patients (n=372) is defined significantly by marital support (0.56, 95%CI 0.34-0.95), previous AMI before the current one (OR=2.19, 95%CI 1.10-4.38), and hospital-induced complications (0.37, 95%CI 0.12-1.12) as well. This presentation accentuates that a cardiovascular event is stressful extremely for an individual and could particularly change the health behavior of AMI patients, smoking cessation can therefore be regarded as a teachable behavior. Of course, if a patient receives PSS, the process of convalescence can be accelerated (75.9% of the sample with social support were able to quit smoking). This fact is proved by Snaterse et al. (2018) highlighting that 51.3% of German and 60% of European AMI patients reported that they managed to quit smoking with different levels of PSS within six weeks after AMI. Moreover, Leong et al (2014) conducted a case-control study in 52 countries (n=12,195; control group n=15,583) proving that after AMI regular moderate alcohol consumption (up to 1 drink daily for women and 1 or 2 drinks daily for men) is more likely to decrease the risk of a new cardiovascular event than abstinence (OR=0.87, MT=0.84-0.94, p=0.001). Watanabe et al. (2022) conduct a comparative analysis between American (n=2.926) and Spanish (n=506) AMI patients. They found that after a cardiovascular event, a higher rate of AMI patients with high PSS could reduce excessive alcohol use to a moderate level than elderly people with low PSS. Nevertheless, alcohol consumption is defined culturally, and its latency is very high, therefore the first and second statistical datasets on alcoholism must be addressed with caution.

## **Literature**

Höpner, et al. (2020): Determinants of persistent smoking after acute myocardial infarction: an observational study. *BMC Cardiovascular Disorders*, 20:384.

Snaterse, M. et al. (2018): Smoking cessation in European patients with coronary heart disease. *Int J Cardiol*. 258:1–6.

Leong, D. P. (2014): Patterns of Alcohol Consumption and Myocardial Infarction Risk Observations From 52 Countries in the INTERHEART Case–Control Study. *Circulation*. 130: 390–398.

Watanabe, et al. (2022): Loss of perceived social role, an index of social frailty, is an independent predictor of future adverse events in hospitalized patients with heart failure. *Front. Cardiovasc. Med*. 9:1051570.