

Association between Loneliness and Diseases Self-Management in Older Adults: Systematic Review

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Background:

- The United States has an increasing number of older people who live alone, have one or more physical impairments or chronic illnesses, experience a major life transition or low socioeconomic status that predispose them to loneliness
- Loneliness is associated with elevated blood pressure, metabolic syndrome,, disrupted sleep, depression, anxiety, dementia, Alzheimer’s diseases, and adverse behaviors such as drinking and smoking
- It is imperative to synthesize the evidence about the associations between loneliness and self-management behaviors in older adults with chronic diseases since older adults with chronic diseases are more at risk for loneliness, and that loneliness affects health behaviors, which are key to managing chronic diseases

Purpose:

The purpose of this systematic review was to 1) describe the prevalence of loneliness and 2) identify the association between loneliness and diseases self-management in older adults

Methods:

- A systematic review of the literature was conducted with established procedures to search the literature, select relevant studies, and synthesize key information from each study.
- PubMed, MEDLINE, PsychINFO, CINAHL, and SocINDEX
 - Articles published in English with sample of older adults 50 years or older and reported relationship between loneliness and self-management behaviors

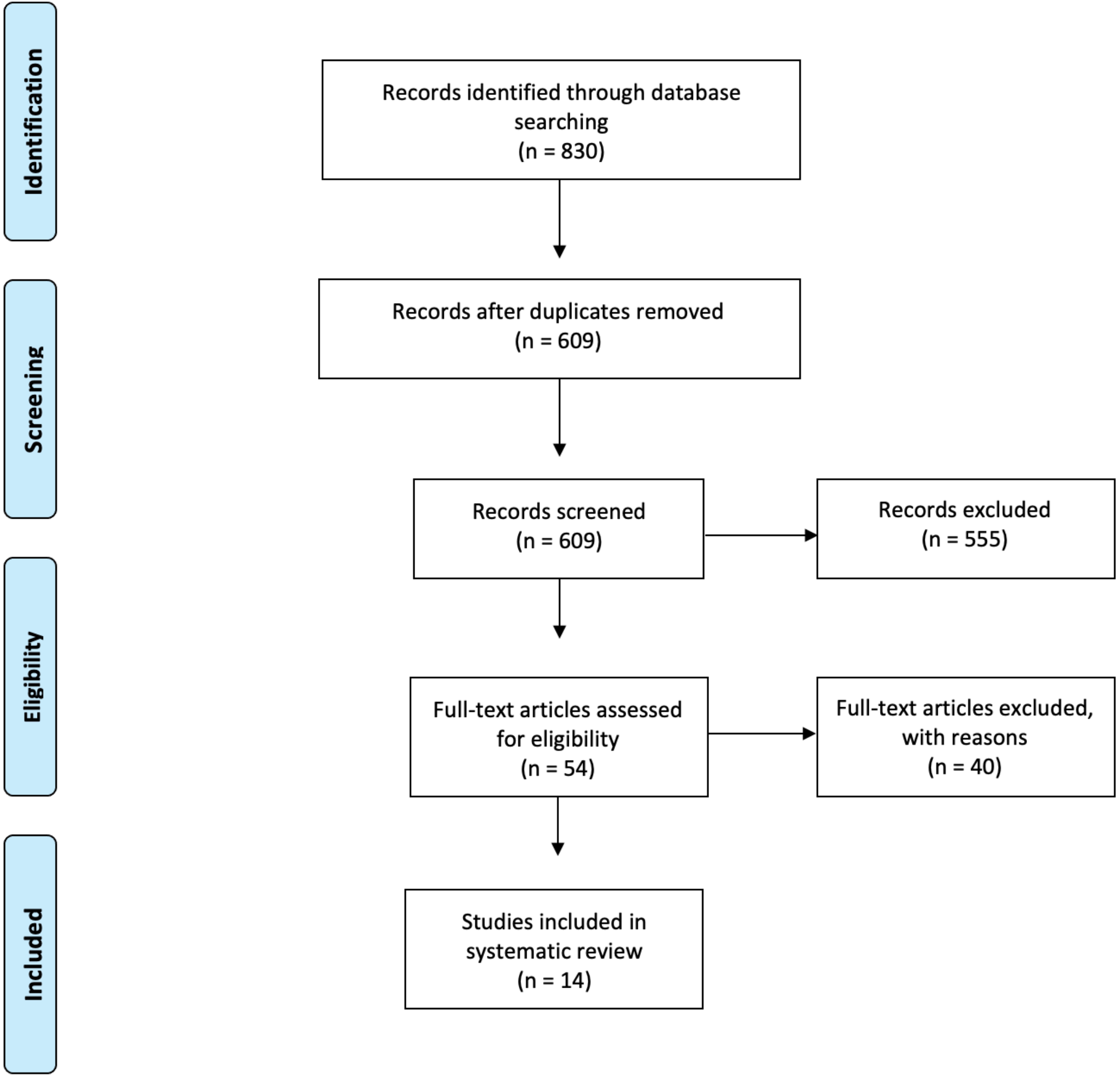


Figure 1. Systematic review flow chart

Findings:

- Fourteen studies from four countries were included in this review with the mean age of the samples ranged from 54 to 87 years of age and sample sizes varied from 370 to 8,932
- Thirteen cross-sectional and one longitudinal study were included
- Several measures of loneliness were used
- Reports of loneliness were frequent and ranged from 7.7% (in a report of severe loneliness) to 43.2% (moderate loneliness) of older adults with and without chronic diseases experience loneliness
- Older adults who experienced loneliness were less likely to be physically active, eat a healthy diet, or cope in positive ways and more likely to be female, have chronic diseases, and seek healthcare

Conclusion:

This systematic review of research conducted in different countries and settings found that loneliness was moderately prevalent, and that loneliness was associated with negative disease self-management behaviors in older adults with chronic diseases. The review identified gaps in the research that includes a need for a consistent, theoretically-based measure of loneliness, research on specific chronic diseases and guided by theoretical pathways. As societies worldwide experience the growth of aging populations who are at higher risk of having chronic diseases as they age, clinicians and researchers should assess and address loneliness of older adults with chronic diseases.

