Top Things To Know
Major Depressive Disorder and Bipolar Disorder Predispose Youth to Accelerated Atherosclerosis and Early Cardiovascular Disease

1. The overall objective of this statement is to increase awareness and recognition of mood disorders, specifically Major Depressive Disorder (MDD) and Bipolar Disorder (BD), among youth as Moderate Risk conditions for early cardiovascular disease (CVD).

2. MDD and BD are the first and fourth most disabling conditions, respectively, among adolescents worldwide. One in ten adolescents in the United States is affected by MDD or BD.

3. The 2011 Expert Panel on Integrated Guidelines for Cardiovascular Health and Risk Reduction in Children and Adolescents identified 4 conditions—chronic inflammatory disease, human immunodeficiency virus, Kawasaki disease, and nephrotic syndrome—as Tier II moderate risk conditions for CVD, based on “pathophysiological evidence for arterial dysfunction indicative of accelerated atherosclerosis before 30 years of age.” MDD and BD meet this criterion, and are more prevalent in adolescents than all 4 of the other conditions combined.

4. CVD and CVD mortality is increased among adults with MDD and BD, and occurs prematurely.

5. Traditional cardiovascular risk factors, such as diabetes and obesity, and suboptimal lifestyle behaviors, such as smoking and sedentary lifestyle, may be more common in adolescents and young adults with MDD or BD.

6. The link between CVD and depression may be mediated through pathophysiological mechanisms such as inflammation, oxidative stress, autonomic dysfunction, and endothelial dysfunction.

7. Some medications used to treat MDD and BD have undesirable side effects such as weight gain in youth and adults. However, increased risk of CVD has also been observed in largely untreated samples, and was observed prior to the use of mood stabilizers and antipsychotics.

8. Because mood disorders are highly prevalent among adolescents, there could be substantial cardiovascular benefits associated with improved identification, monitoring, and treatment of cardiovascular risk factors in this population.

9. The success of this statement will rely on the extent to which it results in improved CVD risk factor screening, prevention, and intervention among adolescents and young adults with mood disorders, and the extent to which it spurs increased collaboration between preventive cardiology, pediatrics, and psychiatry, together with consumers and other stakeholders, in achieving these goals.