

update

stress & health

Newsletter of the Stress & Health Study



Summer 2005

Our 20-year project

It is hard to believe that 20 years have passed since we began the Stress and Health study (also known as the Whitehall II study). You have been generous enough to share details of your health and living and working conditions for two decades, and response rates to our last round of tests were remarkably high. Your contribution has been invaluable in helping to put paid to myths about health, work and social status – and has helped to improve the working life of your successors. For example, our studies have led directly to recent management standards on work-related stress, established by the Health & Safety Executive, with advice to employers on carrying out risk assessments for stress. The recent public health White Paper also drew on our work. Both recognise the role of stress in the development of heart disease, and what can be done to reduce it.

Further from home, I was in Chile in March to launch a World Health Organisation sponsored commission on the Social Determinants of Health: the complex and sometimes unexpected social causes of ill health and early death. The work of this Commission too builds on the foundation laid by our work with you – and we thank you.

Professor Sir Michael Marmot

Page 2-4
Celebrate our 20th anniversary and recall events over two decades ... plus the next phase of the study and a great puzzle

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Focus on alcohol: how it affects our health

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You ask us... your questions answered by the study team



Stress and Health – our

1985-1987 Phase I

STUDY STARTS, developing out of the Whitehall Study, which showed that men in the lowest employment grades were much more likely to die prematurely than men in the highest grades.

MEDICAL EXAMINATIONS take place within Government departments.

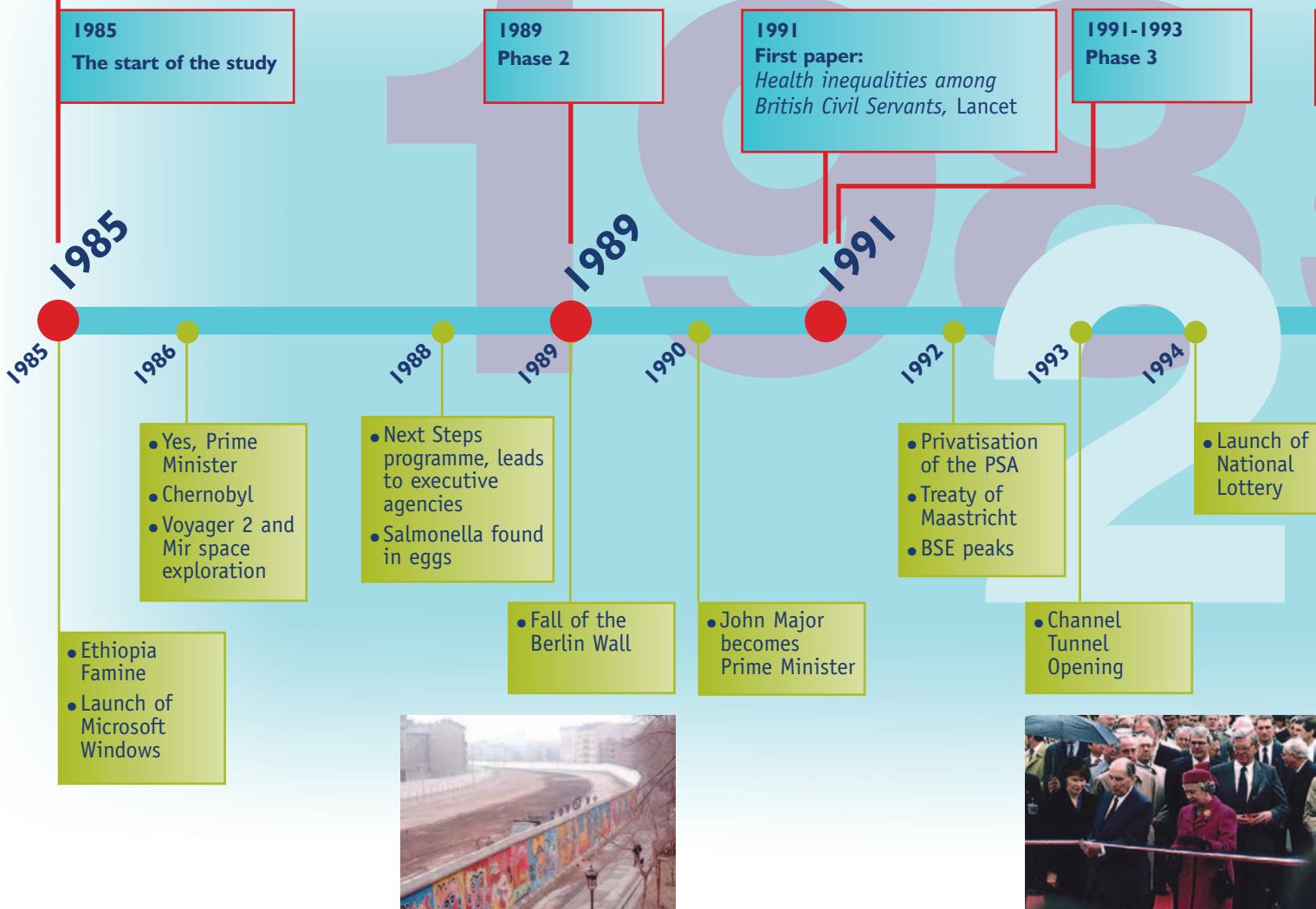
1989-1993 Phases 2&3

MEDICAL EXAMINATIONS take place in Carrera House, with some outside London

FIRST FINDINGS PUBLISHED:

- Social gradient in health among British Civil Servants established. The gap in health between bottom and top employment grades is as big as twenty years previously, in the earlier Whitehall Study

The project milestones



20 year achievement

1995-1999 Phases 4&5

MEDICAL EXAMINATIONS at the Royal London Homoeopathic Hospital and regional centres

FINDINGS:

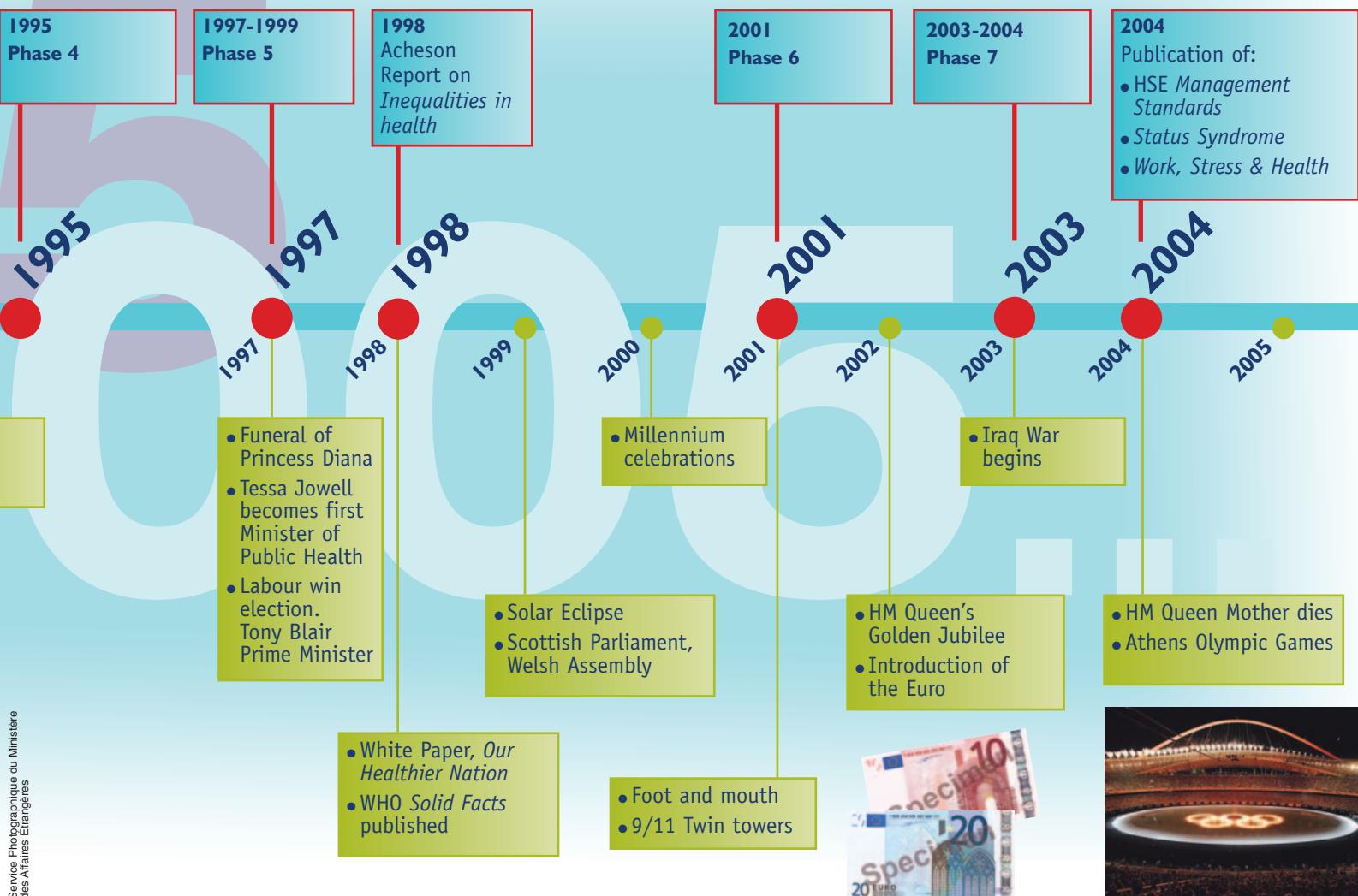
- Work stress and job insecurity linked to heart disease and other illnesses
- Sickness absence from work linked to work stress and job satisfaction
- New government acts on study findings: commissions Acheson Report and White Paper on health and inequalities; first Minister of Public Health appointed

2001-2004 Phases 6&7

MEDICAL EXAMINATIONS at Arthur Stanley House and in participants' homes

FINDINGS:

- Social support linked to better health
- Recently retired people increase their physical activity levels; pathways to retirement increasingly diverse
- Sickness absence indicates a real health problem
- Presenteeism increases the risk of heart disease
- Work stress linked to alcohol dependence in men
- Health and Safety Executive initiates guidelines on reducing stress at work drawing on Whitehall data



Next steps in the study

2006-2009 Phases 8&9

20th ANNIVERSARY

MEDICAL EXAMINATIONS in London and in participants' homes

FINDINGS:

- We anticipate publications on health and healthy functioning in retirement, looking at the importance of what is happening to you now as compared to what happened earlier in life

2006
Phase 8

2008-2009
Phase 9

2006

2008

- Delivery and Reform programme for the Civil Service – 100,000 redundancies planned

Word square answers

Research, Stress, Traffic Lights, Work
Questionnaire, Receptionist, Refreshments,
Michaël Marmot, Nurse, Pen, Physiotherapist,
Diabetic, ECG, Gown, HRV, Lycra, Zade,
Appointement, Blood Pressure, Cholesterol,

WE HAVE BEGUN gearing up for Phase 8 of the study: a questionnaire for all our participants. Those will be sent out during 2006. In Phase 9, we will again be running a medical examination, and continuing the successful programme of home visits, which made up over 10% of our Phase 7 examinations.

Just for fun...

Find 16 words and 3 two-word phrases related to Stress & Health in the grid – horizontal, vertical or diagonal. Answers are below left.

C	A	M	I	C	H	A	E	L	M	A	R	M	O	T	Q
B	O	B	S	C	A	P	B	S	J	L	V	K	P	R	U
A	B	L	O	O	D	P	R	E	S	S	U	R	E	A	E
B	P	H	L	E	B	O	T	O	M	I	S	T	U	F	S
R	E	C	E	P	T	I	N	O	N	I	S	T	F	E	F
E	X	D	A	Z	C	N	G	E	A	R	T	O	C	I	I
F	E	A	D	D	O	T	R	A	Y	J	A	Y	H	C	O
R	S	T	E	I	P	M	M	E	L	O	N	S	O	L	N
E	A	T	R	A	R	E	S	E	A	R	C	H	L	I	N
S	S	I	R	B	E	N	N	V	G	M	E	N	E	G	A
H	O	P	S	E	S	T	O	J	A	O	T	V	S	H	I
M	A	L	E	T	S	K	A	W	O	N	W	U	T	T	R
E	C	G	M	I	I	S	I	P	O	U	Y	N	E	S	E
N	C	L	U	C	O	Z	A	D	E	R	R	H	R	V	E
T	E	O	B	M	N	E	E	D	I	S	K	I	O	E	A
S	Z	R	F	E	Q	I	P	G	D	E	V	B	L	T	X

Keep in touch

Now more than ever, we want to stay in touch. As time goes on, we are even more interested to keep you involved, even if you are no longer a civil servant, or have retired. Do let us know if you move: our details are on the back page.

What's been in the headlines from our study

YOU PROBABLY KNOW that findings from the study have changed the way that doctors think about health, work and social life. But as we find out more, new angles keep cropping up and many of them hit the headlines – like these on alcohol, and working through illness



King Alcohol and his Prime Minister circa 1820. Their cognitive function scores are unknown.

Alcohol and cognitive function

Drinking alcohol may be good for the mind – within reason. Researchers analysed cognitive function scores from the Stress and Health study and compared them to the alcohol intake reported by the participants. They showed that those who drank some alcohol scored better in tests – for memory, reasoning, vocabulary and fluency – than those who drank none. The beneficial effects extended to people taking 30 drinks a week – but the results didn't include enough heavier drinkers to explore an upper limit (other research has suggested that there is a limit). On balance the researchers don't recommend higher alcohol consumption, because it is well known that excess drinking harms health (and see the study on alcohol dependence below). *Am J Epidemiol* (2004) **160**: 240-247.

"Presenteeism": beware the health effects of working through illness

People who take no time off when they are actually sick have heart attacks more often than their colleagues who take time off. After analysis of over 5000 men from the Stress and Health study, researchers were able to show an effect linked to "sickness presenteeism". They looked at unhealthy men who had not previously had a heart attack. Those who worked through illness were twice as likely to have a heart attack as the men who took moderate periods of sick leave. Employers and employees take note, says the study. *Am J Pub Health* (2005) **95**: 98-102

Study news in the journals

The role of control at home: Stress and Health researchers have found that low control over work is an important factor for men's health – but not for women's. Now research suggests that low control at home may be important in predicting the women who will develop heart disease – and it's likely to be those with less money or coping mechanisms for stressful home events. It seems that home factors have a greater

effect on women than on men, say the researchers. *Soc Sci Med* (2004) **58**: 1501-1509.

Active outside work: There's a simple relationship between work and physical activity, say study researchers. Participants working full time did the least physical activity; those who did not work at all were most active; and part-time workers fell between. Retirement seemed to make everyone more

active: those who retired but continued to work part-time were still more active than full-time workers. Higher job grades were more active – perhaps due to the expense of formal activities, the study suggests. *Eur Jnl Pub Health* (2005, in press).

Work and alcohol dependence: A stressful work environment, in which effort is not properly rewarded, raises the risk of

alcohol dependence in men of all job grades. In women, alcohol dependence was more prevalent among people in higher grades, although it was linked to "low decision latitude" – reflecting jobs with little control. The authors suggest more research is needed that explores ways in which occupational health might prevent alcohol dependence. *Occup Environ Med* (2004) **61**: 219-224.

You ask us... .



We'd like to know your reactions to our new fillings...

Food after your tests

I should be grateful if you would kindly consider allergies and other adverse reactions which meant I was unable to eat any of the sandwiches thoughtfully provided for participants in the examination I attended.

Indeed, we will offer a wider choice next time, and try to be allergy-friendly. The sandwiches and fruit placed in the waiting room were our response to comments from participants in the previous phase, who told us that a cup of tea and a biscuit really wasn't enough refreshment, especially after all that fasting. Just so that you know we do listen, read your comments, and make changes to what we do as a result.

Is my data really secure?

How can you be certain that the data will always be secure? A breach would provide a bonanza for burglars and other crooks.

The data is kept under lock and key by our researchers. We work to the highest standards and meet all the

legal requirements for the safe storage of your information, both information on paper, and secure computer storage of electronic data.

Why repeat questions?

The questionnaire is too long, and the same questions appear year after year in your questionnaires. Why is this?

There are several reasons. Some questions are about events: for example, your date of retirement or a change in your marital status. These might happen to people at any time in the study, so they have to be in every version of the questionnaire. There is a second group of questions designed to track changes in people's health or



Are your traffic lights really accurate?

My GP says I'm in good health, but the study gave me a red light. Who is right?

The "traffic lights" assess your risk of a heart attack or stroke, relative to the UK population of all ages. It uses five measures (age, blood pressure, cholesterol, smoking and diabetes) to give a general picture of who could benefit from being treated; it does not assess the risk of other illness, and it cannot predict with 100% accuracy who will go on to develop heart disease. An amber or a red light suggests that you are at a level of risk which warrants further investigation: since participants are now older than the UK average, this may simply reflect your age. Talk over any concerns with your GP.

personal circumstances since last time they completed a questionnaire. Finally, some questions are specific to the last four weeks. The questions may look familiar, but they relate only to the four weeks immediately prior to filling in the questionnaire. It's true that repeating these questions means the questionnaire looks very long. We apologise for this, but we do hope that you understand why it's so important.

Not general knowledge

What can participants possibly derive from these mental tests? Some people enjoy puzzles; I do not. And nobody I spoke to on the day was able to tell me why you do them.

As with the physical tests, these mental tests are not meant primarily to give individual diagnoses but to give a picture of group trends. The main object of these tests is to provide a standard set of measures by which the whole group of participants can be judged. Some find them hard, others easy, others plain annoying - but without them results like those reported on page 5 would not be possible.

Where's the neck study?

I was told at the last examination that I would be invited for a neck scan. Why haven't I heard anything yet?

We were delighted that so many of you were willing to come back to London to have an ultrasound scan of the arteries in the neck. In fact, we were so overwhelmed with the response that we have had to take on extra staff to cope with the appointments. Please bear with us – an invitation letter should be with you shortly.

Please send or email your questions, comments or change of address to:

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