WEBVTT

NOTE duration:"00:52:28" NOTE recognizability:0.865

NOTE language:en-us

NOTE Confidence: 0.816113805833333

 $00:00:00.000 \longrightarrow 00:00:02.198$ Q All for being here this morning

NOTE Confidence: 0.816113805833333

 $00:00:02.198 \longrightarrow 00:00:04.581$ and to for the opportunity to

NOTE Confidence: 0.816113805833333

 $00{:}00{:}04.581 \dashrightarrow 00{:}00{:}06.856$ present in today's grant rounds.

NOTE Confidence: 0.816113805833333

 $00:00:06.860 \longrightarrow 00:00:08.116$ It's my great honor.

NOTE Confidence: 0.816113805833333

00:00:08.116 --> 00:00:10.401 The topic that I would like to

NOTE Confidence: 0.816113805833333

 $00:00:10.401 \longrightarrow 00:00:12.399$ highlight today is the emergence of

NOTE Confidence: 0.816113805833333

 $00{:}00{:}12.399 \dashrightarrow 00{:}00{:}14.471$ the field of cardiac psychology and

NOTE Confidence: 0.816113805833333

00:00:14.471 --> 00:00:17.227 to make a case how we should broaden

NOTE Confidence: 0.816113805833333

 $00:00:17.227 \longrightarrow 00:00:19.729$ it to include vascular populations and

NOTE Confidence: 0.816113805833333

 $00{:}00{:}19.729 \dashrightarrow 00{:}00{:}22.772$ how both cardiac as well as vascular

NOTE Confidence: 0.816113805833333

 $00{:}00{:}22.772 \dashrightarrow 00{:}00{:}24.922$ populations all would benefit from

NOTE Confidence: 0.816113805833333

 $00:00:24.922 \longrightarrow 00:00:27.166$ integrated cardiovascular, behavioral

NOTE Confidence: 0.816113805833333

 $00:00:27.166 \longrightarrow 00:00:30.896$ healthcare in the specialty setting.

 $00:00:30.900 \longrightarrow 00:00:32.548$ These are my disclosures.

NOTE Confidence: 0.935290196363636

 $00{:}00{:}36.350 \dashrightarrow 00{:}00{:}38.456$ I would like to dedicate today's

NOTE Confidence: 0.935290196363636

00:00:38.456 --> 00:00:40.410 lecture to my great mentor,

NOTE Confidence: 0.935290196363636

 $00:00:40.410 \longrightarrow 00:00:42.630$ alluded to in the introduction,

NOTE Confidence: 0.935290196363636

00:00:42.630 --> 00:00:44.172 who has been a great support

NOTE Confidence: 0.935290196363636

 $00:00:44.172 \longrightarrow 00:00:44.943$ throughout my career.

NOTE Confidence: 0.935290196363636

 $00:00:44.950 \longrightarrow 00:00:47.335$ Yohan done on it also

NOTE Confidence: 0.935290196363636

 $00{:}00{:}47.335 \dashrightarrow 00{:}00{:}49.243$ Belgian native like myself.

NOTE Confidence: 0.935290196363636

 $00{:}00{:}49.250 \dashrightarrow 00{:}00{:}51.610$ Whose theory focused on a

NOTE Confidence: 0.935290196363636

 $00:00:51.610 \longrightarrow 00:00:53.498$ combination of personality traits

NOTE Confidence: 0.935290196363636

 $00{:}00{:}53.498 \dashrightarrow 00{:}00{:}56.256$ that proved to be particularly

NOTE Confidence: 0.935290196363636

 $00:00:56.256 \longrightarrow 00:00:58.468$ toxic for cardiovascular outcomes.

NOTE Confidence: 0.935290196363636

00:00:58.470 --> 00:01:00.420 Without his encouragement and support,

NOTE Confidence: 0.935290196363636

 $00:01:00.420 \longrightarrow 00:01:02.908$ I would not stand here today and so

NOTE Confidence: 0.935290196363636

 $00:01:02.908 \longrightarrow 00:01:05.551$ his work and passion for the field

NOTE Confidence: 0.935290196363636

00:01:05.551 --> 00:01:07.800 has definitely been passed on to

 $00:01:07.800 \longrightarrow 00:01:10.195$ many of us who have spread out and

NOTE Confidence: 0.935290196363636

00:01:10.195 --> 00:01:12.973 trained under him and all of us have

NOTE Confidence: 0.935290196363636

00:01:12.973 --> 00:01:15.311 spread out over the world to continue

NOTE Confidence: 0.935290196363636

 $00:01:15.382 \longrightarrow 00:01:17.678$ the the work that is ahead of us.

NOTE Confidence: 0.896964118888889

 $00:01:20.310 \longrightarrow 00:01:22.034$ So for today's presentation,

NOTE Confidence: 0.896964118888889

 $00:01:22.034 \longrightarrow 00:01:25.478$ I would like to take you back to

NOTE Confidence: 0.896964118888889

 $00:01:25.478 \longrightarrow 00:01:27.794$ some of the origins of health,

NOTE Confidence: 0.896964118888889

 $00:01:27.800 \longrightarrow 00:01:30.512$ psychology and some of the defining

NOTE Confidence: 0.896964118888889

 $00:01:30.512 \longrightarrow 00:01:33.030$ moments as a response to the

NOTE Confidence: 0.896964118888889

 $00{:}01{:}33.030 \dashrightarrow 00{:}01{:}35.090$ post war chronic disease burden.

NOTE Confidence: 0.896964118888889

 $00:01:35.090 \longrightarrow 00:01:37.071$ And following that I would like to

NOTE Confidence: 0.896964118888889

 $00:01:37.071 \longrightarrow 00:01:38.843$ zoom in on further subspecialization

NOTE Confidence: 0.896964118888889

 $00{:}01{:}38.843 \to 00{:}01{:}41.839$ that occurred and as an example would

NOTE Confidence: 0.896964118888889

 $00:01:41.839 \longrightarrow 00:01:44.594$ like to highlight the feel of cardiac

NOTE Confidence: 0.896964118888889

 $00:01:44.594 \longrightarrow 00:01:46.876$ psychology and the research and the

 $00:01:46.876 \longrightarrow 00:01:49.174$ interventions that led up to it.

NOTE Confidence: 0.896964118888889

 $00{:}01{:}49.180 \dashrightarrow 00{:}01{:}51.476$ Next I would like to broaden the

NOTE Confidence: 0.896964118888889

 $00:01:51.476 \longrightarrow 00:01:53.362$ focus to include populations with

NOTE Confidence: 0.896964118888889

 $00:01:53.362 \longrightarrow 00:01:55.852$ vascular disease and those as those

NOTE Confidence: 0.896964118888889

 $00:01:55.852 \longrightarrow 00:01:58.067$ have been the primary focus of

NOTE Confidence: 0.896964118888889

00:01:58.067 --> 00:02:00.404 our work and I will conclude with

NOTE Confidence: 0.896964118888889

 $00:02:00.404 \longrightarrow 00:02:02.224$ making the case for integrated

NOTE Confidence: 0.896964118888889

 $00:02:02.224 \longrightarrow 00:02:04.185$ behavioral health care for both

NOTE Confidence: 0.896964118888889

 $00{:}02{:}04.185 \dashrightarrow 00{:}02{:}05.969$ cardiac and vascular populations.

NOTE Confidence: 0.920614262857143

 $00:02:09.210 \longrightarrow 00:02:12.059$ So before we dive back in history,

NOTE Confidence: 0.920614262857143

 $00{:}02{:}12.060 \dashrightarrow 00{:}02{:}14.934$ I want to highlight what the

NOTE Confidence: 0.920614262857143

 $00:02:14.934 \longrightarrow 00:02:16.371$ American Psychological Association

NOTE Confidence: 0.920614262857143

 $00:02:16.371 \longrightarrow 00:02:19.330$ today defines as health psychology.

NOTE Confidence: 0.920614262857143

 $00:02:19.330 \longrightarrow 00:02:23.316$ They defined as discipline as a discipline

NOTE Confidence: 0.920614262857143

00:02:23.316 --> 00:02:25.597 that examines how biological, social,

NOTE Confidence: 0.920614262857143

 $00{:}02{:}25.597 \dashrightarrow 00{:}02{:}27.625$ and psychosocial factors influence

 $00:02:27.625 \longrightarrow 00:02:30.740$ health but also illness and health.

NOTE Confidence: 0.920614262857143

 $00:02:30.740 \longrightarrow 00:02:32.696$ Psychologists use their psychological

NOTE Confidence: 0.920614262857143

 $00:02:32.696 \longrightarrow 00:02:35.630$ signs to promote health to prevent

NOTE Confidence: 0.920614262857143

 $00:02:35.700 \longrightarrow 00:02:38.350$ illness and improve healthcare systems.

NOTE Confidence: 0.920614262857143

 $00:02:38.350 \longrightarrow 00:02:41.356$ So I want you to keep in mind that

NOTE Confidence: 0.920614262857143

 $00:02:41.356 \longrightarrow 00:02:45.520$ definition as we dive into today's lecture.

NOTE Confidence: 0.920614262857143

 $00:02:45.520 \longrightarrow 00:02:48.400$ So some of the historical origins of the

NOTE Confidence: 0.920614262857143

 $00{:}02{:}48.400 \dashrightarrow 00{:}02{:}51.280$ field are traced back to the post World

NOTE Confidence: 0.920614262857143

00:02:51.280 --> 00:02:54.370 War Two period where how psychology

NOTE Confidence: 0.920614262857143

 $00:02:54.370 \longrightarrow 00:02:58.207$ really emerged as a reaction to some

NOTE Confidence: 0.920614262857143

 $00:02:58.207 \longrightarrow 00:03:01.573$ of the changing phenomena in society.

NOTE Confidence: 0.920614262857143 00:03:01.580 --> 00:03:02.456 First of all,

NOTE Confidence: 0.920614262857143

 $00:03:02.456 \longrightarrow 00:03:04.500$ we saw a decline of infectious diseases,

NOTE Confidence: 0.920614262857143

 $00:03:04.500 \longrightarrow 00:03:07.390$ but at the same time also a rise of chronic

NOTE Confidence: 0.920614262857143

 $00:03:07.465 \longrightarrow 00:03:10.159$ conditions due to the changed lifestyle,

 $00:03:10.160 \longrightarrow 00:03:14.270$ working and living conditions in the

NOTE Confidence: 0.920614262857143

 $00:03:14.270 \longrightarrow 00:03:17.010$ populations in industrialized nations.

NOTE Confidence: 0.920614262857143

00:03:17.010 --> 00:03:20.850 And the origins of health psychology

NOTE Confidence: 0.920614262857143

 $00:03:20.850 \longrightarrow 00:03:22.645$ technically can be traced back

NOTE Confidence: 0.920614262857143

00:03:22.645 --> 00:03:25.593 in in the US to this publication

NOTE Confidence: 0.920614262857143

00:03:25.593 --> 00:03:28.147 of Williams Schofield in 1969,

NOTE Confidence: 0.920614262857143

00:03:28.147 --> 00:03:31.066 where the Roll of Psychology in the

NOTE Confidence: 0.920614262857143

 $00{:}03{:}31.066 \dashrightarrow 00{:}03{:}33.639$ delivery of health services was a

NOTE Confidence: 0.920614262857143

 $00{:}03{:}33.639 \dashrightarrow 00{:}03{:}36.786$ report that was published by the

NOTE Confidence: 0.920614262857143

 $00:03:36.786 \longrightarrow 00:03:38.682$ American Psychological Association

NOTE Confidence: 0.920614262857143

 $00{:}03{:}38.682 \dashrightarrow 00{:}03{:}41.210$ in the American psychologist.

NOTE Confidence: 0.920614262857143

 $00:03:41.210 \longrightarrow 00:03:43.870$ And all over the world we saw

NOTE Confidence: 0.920614262857143

 $00:03:43.870 \longrightarrow 00:03:45.576$ similar developments taking place,

NOTE Confidence: 0.920614262857143

00:03:45.576 --> 00:03:47.344 and as an example,

NOTE Confidence: 0.920614262857143

 $00:03:47.350 \longrightarrow 00:03:50.350$ French psychology after World War Two.

NOTE Confidence: 0.920614262857143

 $00:03:50.350 \longrightarrow 00:03:52.410$ Increasingly clinical psychology was

 $00:03:52.410 \longrightarrow 00:03:54.985$ being delivered in health settings.

NOTE Confidence: 0.920614262857143

 $00:03:54.990 \longrightarrow 00:03:58.950$ It was influenced by psychoanalysis,

NOTE Confidence: 0.920614262857143

00:03:58.950 --> 00:04:00.814 social and clinical psychology

NOTE Confidence: 0.920614262857143

 $00:04:00.814 \longrightarrow 00:04:01.746$ and psychopathology,

NOTE Confidence: 0.920614262857143

 $00:04:01.750 \longrightarrow 00:04:03.334$ and so this blend,

NOTE Confidence: 0.920614262857143

 $00:04:03.334 \longrightarrow 00:04:05.710$ in addition with the influence of

NOTE Confidence: 0.920614262857143

00:04:05.791 --> 00:04:07.849 American social psychology,

NOTE Confidence: 0.920614262857143

 $00:04:07.850 \longrightarrow 00:04:10.355$ social cognitive theories of health

NOTE Confidence: 0.920614262857143 00:04:10.355 --> 00:04:11.357 and illness. NOTE Confidence: 0.920614262857143

 $00{:}04{:}11.360 \dashrightarrow 00{:}04{:}14.360$ Brought it together to this health

NOTE Confidence: 0.920614262857143

 $00:04:14.360 \longrightarrow 00:04:16.360$ psychology field that emerged.

NOTE Confidence: 0.920614262857143

00:04:16.360 --> 00:04:17.172 And increasingly,

NOTE Confidence: 0.920614262857143

 $00{:}04{:}17.172 \dashrightarrow 00{:}04{:}19.608$ this new discipline was being disseminated

NOTE Confidence: 0.920614262857143

 $00:04:19.608 \longrightarrow 00:04:22.522$ in the hospital setting and in the public

NOTE Confidence: 0.920614262857143

 $00:04:22.522 \longrightarrow 00:04:24.980$ health sphere and all around the world.

00:04:24.980 --> 00:04:27.458 We saw similar developments taking place,

NOTE Confidence: 0.920614262857143

 $00:04:27.460 \longrightarrow 00:04:28.640$ such as in the UK,

NOTE Confidence: 0.920614262857143

00:04:28.640 --> 00:04:29.888 Brazil, South Africa,

NOTE Confidence: 0.920614262857143

 $00:04:29.888 \longrightarrow 00:04:31.163$ the Netherlands, Australia,

NOTE Confidence: 0.920614262857143

 $00:04:31.163 \longrightarrow 00:04:32.049$ and elsewhere.

NOTE Confidence: 0.887911075454545

 $00:04:36.090 \longrightarrow 00:04:38.650$ Other key critical developments that

NOTE Confidence: 0.887911075454545

 $00:04:38.650 \longrightarrow 00:04:42.141$ allow this new discipline to emerge is

NOTE Confidence: 0.887911075454545

00:04:42.141 --> 00:04:44.738 really a variety and and a fortunate

NOTE Confidence: 0.887911075454545

 $00{:}04{:}44.738 \dashrightarrow 00{:}04{:}47.723$ set of circumstances and and critical

NOTE Confidence: 0.887911075454545

 $00:04:47.723 \longrightarrow 00:04:50.963$ breakthroughs down to we saw evolve.

NOTE Confidence: 0.887911075454545

 $00{:}04{:}50.970 \dashrightarrow 00{:}04{:}54.099$ So first of all, we had high-quality

NOTE Confidence: 0.887911075454545

 $00:04:54.099 \longrightarrow 00:04:55.959$ epidemiological evidence how behavior

NOTE Confidence: 0.887911075454545

 $00:04:55.959 \longrightarrow 00:04:58.194$ and disease incidents were causally

NOTE Confidence: 0.887911075454545

 $00:04:58.194 \longrightarrow 00:05:00.487$ related and the most prominent

NOTE Confidence: 0.887911075454545

 $00:05:00.487 \longrightarrow 00:05:03.085$ example of that is smoking behavior

NOTE Confidence: 0.887911075454545

 $00{:}05{:}03.085 \dashrightarrow 00{:}05{:}05.587$ and the incidence of lung cancer.

 $00:05:05.587 \longrightarrow 00:05:07.981$ So that is an important development

NOTE Confidence: 0.887911075454545

 $00:05:07.981 \longrightarrow 00:05:10.508$ that took place and then with the

NOTE Confidence: 0.887911075454545

 $00{:}05{:}10.508 \dashrightarrow 00{:}05{:}12.949$ rise of the chronic health burden.

NOTE Confidence: 0.887911075454545

 $00:05:12.950 \longrightarrow 00:05:14.846$ Of course came also the rise of the

NOTE Confidence: 0.887911075454545

 $00:05:14.846 \longrightarrow 00:05:17.136$ cost of healthcare and the need for

NOTE Confidence: 0.887911075454545

 $00:05:17.136 \longrightarrow 00:05:18.896$ more effectiveness and efficiency in

NOTE Confidence: 0.887911075454545

 $00:05:18.960 \longrightarrow 00:05:21.109$ the delivery of health care and health.

NOTE Confidence: 0.887911075454545

 $00:05:21.110 \longrightarrow 00:05:24.790$ Ecology was one of the responses to that.

NOTE Confidence: 0.887911075454545

 $00{:}05{:}24.790 \dashrightarrow 00{:}05{:}27.492$ At medical schools we saw also an

NOTE Confidence: 0.887911075454545

 $00:05:27.492 \longrightarrow 00:05:29.535$ uptake in teaching of behavioral

NOTE Confidence: 0.887911075454545

 $00:05:29.535 \longrightarrow 00:05:32.342$ sciences as a part of the curriculum

NOTE Confidence: 0.887911075454545

 $00:05:32.342 \longrightarrow 00:05:35.575$ and an increase in communication skills

NOTE Confidence: 0.887911075454545

 $00{:}05{:}35.575 \dashrightarrow 00{:}05{:}38.325$ training to improve patient adherence,

NOTE Confidence: 0.887911075454545

 $00{:}05{:}38.330 \dashrightarrow 00{:}05{:}39.938$ patient satisfaction satisfaction.

NOTE Confidence: 0.887911075454545

00:05:39.938 --> 00:05:44.169 So an increased focus and an openness to

 $00:05:44.169 \longrightarrow 00:05:47.345$ that in the medical schools was taking place.

NOTE Confidence: 0.887911075454545

 $00:05:47.350 \longrightarrow 00:05:50.066$ We saw more and more clinical psychology

NOTE Confidence: 0.887911075454545

 $00:05:50.066 \longrightarrow 00:05:51.686$ behavioral medicine also moving

NOTE Confidence: 0.887911075454545

00:05:51.686 --> 00:05:54.050 into the primary care setting and

NOTE Confidence: 0.887911075454545

 $00:05:54.050 \longrightarrow 00:05:56.130$ collaborative care models being offered.

NOTE Confidence: 0.887911075454545

00:05:56.130 --> 00:05:59.504 During this era also we had important

NOTE Confidence: 0.887911075454545

 $00:05:59.504 \longrightarrow 00:06:01.621$ theories for behavioral change

NOTE Confidence: 0.887911075454545

 $00:06:01.621 \longrightarrow 00:06:03.397$ models being developed,

NOTE Confidence: 0.887911075454545

 $00:06:03.400 \longrightarrow 00:06:06.230$ tested and used for interventions

NOTE Confidence: 0.887911075454545

 $00:06:06.230 \longrightarrow 00:06:08.494$ with evidence based interventions

NOTE Confidence: 0.887911075454545

 $00:06:08.494 \longrightarrow 00:06:11.898$ that we still use up until this day

NOTE Confidence: 0.887911075454545

 $00:06:11.898 \longrightarrow 00:06:14.579$ that were developed during this period

NOTE Confidence: 0.887911075454545

 $00:06:14.580 \longrightarrow 00:06:17.112$ and we actually became pretty good

NOTE Confidence: 0.887911075454545

 $00:06:17.112 \longrightarrow 00:06:19.178$ in predicting health behavior change

NOTE Confidence: 0.887911075454545

00:06:19.178 --> 00:06:21.614 with an emphasis on health beliefs,

NOTE Confidence: 0.887911075454545

 $00{:}06{:}21.620 \dashrightarrow 00{:}06{:}24.968$ attitudes and behavior.

 $00:06:24.970 \longrightarrow 00:06:27.544$ And then another parallel of development

NOTE Confidence: 0.887911075454545

 $00:06:27.544 \longrightarrow 00:06:31.228$ was the field of second neural immunology,

NOTE Confidence: 0.887911075454545

 $00:06:31.230 \longrightarrow 00:06:33.414$ where we really saw the relationship

NOTE Confidence: 0.887911075454545

 $00:06:33.414 \longrightarrow 00:06:35.554$ between the immune system and the

NOTE Confidence: 0.887911075454545

 $00{:}06{:}35.554 \dashrightarrow 00{:}06{:}37.420$ central nervous system and the role

NOTE Confidence: 0.887911075454545

 $00{:}06{:}37.420 \dashrightarrow 00{:}06{:}39.571$ of stress being documented in a in

NOTE Confidence: 0.887911075454545

 $00:06:39.571 \longrightarrow 00:06:40.743$ a very detailed way,

NOTE Confidence: 0.887911075454545

 $00:06:40.750 \longrightarrow 00:06:43.380$ and then finally unfortunately the

NOTE Confidence: 0.887911075454545

 $00{:}06{:}43.380 \dashrightarrow 00{:}06{:}46.820$ AIDS and HIV epidemic in the 80s.

NOTE Confidence: 0.887911075454545

 $00:06:46.820 \longrightarrow 00:06:49.245$ Also spurred funding in behavioral

NOTE Confidence: 0.887911075454545

 $00:06:49.245 \longrightarrow 00:06:50.215$ health research,

NOTE Confidence: 0.887911075454545

 $00{:}06{:}50.220 \dashrightarrow 00{:}06{:}53.450$ so those developments were critical

NOTE Confidence: 0.887911075454545

 $00{:}06{:}53.450 \dashrightarrow 00{:}06{:}56.680$ for this discipline to emerge.

NOTE Confidence: 0.887911075454545

 $00{:}06{:}56.680 \dashrightarrow 00{:}06{:}58.969$ Yale had a very important role also

NOTE Confidence: 0.887911075454545

00:06:58.969 --> 00:07:01.688 in helping to shape this field of

00:07:01.688 --> 00:07:03.356 health technology with yields,

NOTE Confidence: 0.887911075454545

 $00:07:03.360 \longrightarrow 00:07:06.258$ President Peter Salovey being one of

NOTE Confidence: 0.887911075454545

 $00:07:06.258 \longrightarrow 00:07:09.083$ the Inspirators who helped define the

NOTE Confidence: 0.887911075454545

 $00:07:09.083 \longrightarrow 00:07:11.444$ field with others and highlighting the

NOTE Confidence: 0.887911075454545

00:07:11.444 --> 00:07:14.340 fact that people sense of their own health,

NOTE Confidence: 0.887911075454545

 $00:07:14.340 \longrightarrow 00:07:17.245$ is not only the reflection of their

NOTE Confidence: 0.887911075454545

00:07:17.245 --> 00:07:19.299 psychological and physical well being,

NOTE Confidence: 0.887911075454545

 $00:07:19.300 \longrightarrow 00:07:21.736$ but also a good predictor for

NOTE Confidence: 0.887911075454545

 $00:07:21.736 \longrightarrow 00:07:23.828$ subsequent physical health and how

NOTE Confidence: 0.887911075454545

 $00:07:23.828 \longrightarrow 00:07:26.204$ these two are are really intertwined.

NOTE Confidence: 0.770955804

 $00:07:29.550 \longrightarrow 00:07:31.578$ Further formalization took

NOTE Confidence: 0.770955804

 $00:07:31.578 \longrightarrow 00:07:35.588$ them place with in 1976.

NOTE Confidence: 0.770955804

 $00{:}07{:}35.588 \dashrightarrow 00{:}07{:}37.878$ The establishment of the Division

NOTE Confidence: 0.770955804

 $00:07:37.878 \longrightarrow 00:07:41.017$ 38 that was referred to in the

NOTE Confidence: 0.770955804

 $00:07:41.017 \longrightarrow 00:07:43.067$ beginning of of the introduction.

NOTE Confidence: 0.770955804

 $00{:}07{:}43.070 \dashrightarrow 00{:}07{:}45.214$ Where the American Psychological

 $00:07:45.214 \longrightarrow 00:07:47.358$ Association established a separate

NOTE Confidence: 0.770955804

 $00{:}07{:}47.358 \dashrightarrow 00{:}07{:}49.635$ division directed towards health psychology

NOTE Confidence: 0.770955804

 $00:07:49.635 \longrightarrow 00:07:52.281$ and which is still up until today.

NOTE Confidence: 0.770955804

 $00:07:52.290 \longrightarrow 00:07:54.470$ Very active.

NOTE Confidence: 0.770955804

 $00{:}07{:}54.470 \dashrightarrow 00{:}07{:}57.438$ You had also one of the foundational

NOTE Confidence: 0.770955804

 $00:07:57.438 \longrightarrow 00:08:00.024$ conferences that really brought behavioral

NOTE Confidence: 0.770955804

 $00:08:00.024 \longrightarrow 00:08:03.109$ health and biomedical scientists together.

NOTE Confidence: 0.770955804

 $00:08:03.110 \longrightarrow 00:08:04.945$ How we should together solve

NOTE Confidence: 0.770955804

 $00:08:04.945 \longrightarrow 00:08:06.780$ problems of health and illness

NOTE Confidence: 0.770955804

 $00{:}08{:}06.846 \dashrightarrow 00{:}08{:}08.590$ in an interdisciplinary way.

NOTE Confidence: 0.770955804

 $00:08:08.590 \longrightarrow 00:08:11.086$ And this was led by Gary

NOTE Confidence: 0.770955804

 $00{:}08{:}11.086 \dashrightarrow 00{:}08{:}12.750$ Schwartz and Stephen Weiss.

NOTE Confidence: 0.770955804

 $00:08:12.750 \longrightarrow 00:08:14.490$ And then in the early 80s,

NOTE Confidence: 0.770955804

 $00:08:14.490 \longrightarrow 00:08:17.505$ the Arden House Conference really

NOTE Confidence: 0.770955804

00:08:17.505 --> 00:08:19.917 scoped out the professional

 $00:08:19.917 \longrightarrow 00:08:22.419$ responsibilities and the training

NOTE Confidence: 0.770955804

 $00:08:22.419 \longrightarrow 00:08:24.847$ requirements for health psychologists.

NOTE Confidence: 0.770955804

 $00:08:24.850 \longrightarrow 00:08:27.238$ So together these multidisciplinary

NOTE Confidence: 0.770955804

 $00:08:27.238 \longrightarrow 00:08:29.029$ developments and professionals

NOTE Confidence: 0.770955804

 $00:08:29.029 \longrightarrow 00:08:31.754$ promoted the importance of behavioral

NOTE Confidence: 0.770955804

 $00:08:31.754 \longrightarrow 00:08:34.340$ health and and spurring more research

NOTE Confidence: 0.770955804

 $00:08:34.340 \longrightarrow 00:08:36.270$ and education in this domain.

NOTE Confidence: 0.884027469375

00:08:39.850 --> 00:08:42.560 So in the next part I would like to zoom

NOTE Confidence: 0.884027469375

 $00{:}08{:}42.630 \dashrightarrow 00{:}08{:}45.408$ in more on the further subspecialization.

NOTE Confidence: 0.884027469375

 $00:08:45.410 \longrightarrow 00:08:47.854$ Since this new discipline

NOTE Confidence: 0.884027469375

 $00{:}08{:}47.854 \dashrightarrow 00{:}08{:}50.298$ emerged and the observations,

NOTE Confidence: 0.884027469375

 $00:08:50.300 \longrightarrow 00:08:52.267$ the research that led up to this,

NOTE Confidence: 0.884027469375

 $00:08:52.270 \longrightarrow 00:08:54.330$ and while not officially

NOTE Confidence: 0.884027469375

 $00{:}08{:}54.330 \dashrightarrow 00{:}08{:}56.390$ recognized as a subspecialty,

NOTE Confidence: 0.884027469375

 $00:08:56.390 \longrightarrow 00:08:58.777$ it certainly is emerging and the relevance

NOTE Confidence: 0.884027469375

 $00{:}08{:}58.777 \dashrightarrow 00{:}09{:}01.569$ of it has become increasingly clear.

 $00:09:01.570 \longrightarrow 00:09:04.225$ So I'm talking about cardiac

NOTE Confidence: 0.884027469375

 $00{:}09{:}04.225 \dashrightarrow 00{:}09{:}07.998$ psychology as people refer to it.

NOTE Confidence: 0.884027469375

 $00:09:08.000 \longrightarrow 00:09:11.256$ Also, a little bit of history here that

NOTE Confidence: 0.884027469375

 $00:09:11.260 \longrightarrow 00:09:13.620$ took place around the same time as health

NOTE Confidence: 0.884027469375

 $00:09:13.620 \longrightarrow 00:09:15.499$ psychology in general was developing,

NOTE Confidence: 0.884027469375

 $00:09:15.500 \longrightarrow 00:09:17.845$ taking us back to the work on

NOTE Confidence: 0.884027469375

00:09:17.845 --> 00:09:20.069 type A personality in which I will

NOTE Confidence: 0.884027469375

 $00:09:20.069 \longrightarrow 00:09:22.279$ talk a little bit more in a bit.

NOTE Confidence: 0.884027469375

 $00{:}09{:}22.280 \rightarrow 00{:}09{:}25.588$ Going from type A personality

NOTE Confidence: 0.884027469375

 $00:09:25.588 \longrightarrow 00:09:27.473$ to elements of its personality,

NOTE Confidence: 0.884027469375

00:09:27.480 --> 00:09:28.896 anger, hostility, focusing,

NOTE Confidence: 0.884027469375

 $00{:}09{:}28.896 \dashrightarrow 00{:}09{:}31.728$ then the next wave of research

NOTE Confidence: 0.884027469375

 $00{:}09{:}31.728 \dashrightarrow 00{:}09{:}34.079$ on depression and the individual

NOTE Confidence: 0.884027469375

 $00{:}09{:}34.079 \dashrightarrow 00{:}09{:}37.550$ elements of all the types of symptoms,

NOTE Confidence: 0.884027469375

00:09:37.550 --> 00:09:39.734 somatic versus cognitive,

 $00:09:39.734 \longrightarrow 00:09:44.102$ in the toxicity of cardiovascular outcomes.

NOTE Confidence: 0.884027469375

 $00{:}09{:}44.110 \dashrightarrow 00{:}09{:}46.756$ A related concept where the emphasis was

NOTE Confidence: 0.884027469375

00:09:46.756 --> 00:09:49.320 on fatigue was vital exhaustion that

NOTE Confidence: 0.884027469375

 $00:09:49.320 \longrightarrow 00:09:52.026$ was also coming from the Netherlands,

NOTE Confidence: 0.884027469375

 $00:09:52.030 \longrightarrow 00:09:54.564$ studied by apples in mass thrift and

NOTE Confidence: 0.884027469375

 $00:09:54.564 \longrightarrow 00:09:57.604$ for some of you might be familiar

NOTE Confidence: 0.884027469375

 $00:09:57.604 \longrightarrow 00:09:59.944$ with the mass Thrift Questionnaire

NOTE Confidence: 0.884027469375

 $00:09:59.944 \longrightarrow 00:10:02.379$ which was developed over there.

NOTE Confidence: 0.884027469375

 $00:10:02.380 \longrightarrow 00:10:04.630$ And then further research on

NOTE Confidence: 0.884027469375

 $00:10:04.630 \longrightarrow 00:10:05.980$ other psychosocial factors,

NOTE Confidence: 0.884027469375

 $00:10:05.980 \longrightarrow 00:10:07.840$ anxiety and of course a large

NOTE Confidence: 0.884027469375

 $00:10:07.840 \longrightarrow 00:10:09.590$ body of research on stress,

NOTE Confidence: 0.884027469375

 $00{:}10{:}09.590 \dashrightarrow 00{:}10{:}12.908$ both acute and chronic stress that

NOTE Confidence: 0.884027469375

 $00{:}10{:}12.908 \dashrightarrow 00{:}10{:}14.896$ was developed in highlighting.

NOTE Confidence: 0.884027469375

00:10:14.896 --> 00:10:17.962 Again the work of my mentor going

NOTE Confidence: 0.884027469375

 $00:10:17.962 \longrightarrow 00:10:20.902$ hunting led to a developed a theory and

 $00:10:20.902 \longrightarrow 00:10:23.194$ described the phenomenon of the depressed,

NOTE Confidence: 0.884027469375

00:10:23.200 --> 00:10:26.060 the distressed type D personality,

NOTE Confidence: 0.884027469375

 $00:10:26.060 \longrightarrow 00:10:28.330$ which is a combination of

NOTE Confidence: 0.884027469375

 $00:10:28.330 \longrightarrow 00:10:29.238$ negative affectivity,

NOTE Confidence: 0.884027469375

 $00:10:29.240 \longrightarrow 00:10:32.486$ the tendency to experience negative emotions.

NOTE Confidence: 0.884027469375

 $00:10:32.490 \longrightarrow 00:10:34.110$ But at the same time,

NOTE Confidence: 0.884027469375

 $00:10:34.110 \longrightarrow 00:10:36.225$ also scoring high on social

NOTE Confidence: 0.884027469375

 $00:10:36.225 \longrightarrow 00:10:38.340$ inhibition so people not sharing

NOTE Confidence: 0.884027469375

 $00:10:38.412 \longrightarrow 00:10:41.586$ their emotions and he documented in

NOTE Confidence: 0.884027469375

 $00{:}10{:}41.586 \rightarrow 00{:}10{:}43.173$ several cardiovascular populations

NOTE Confidence: 0.884027469375

 $00:10:43.173 \longrightarrow 00:10:45.640$ that that combination is particularly

NOTE Confidence: 0.884027469375

 $00{:}10{:}45.640 \dashrightarrow 00{:}10{:}48.308$ cardiotoxic as as we refer to it.

NOTE Confidence: 0.880269895333333

 $00{:}10{:}50.900 \dashrightarrow 00{:}10{:}54.290$ So the first description that was

NOTE Confidence: 0.880269895333333

 $00{:}10{:}54.290 \dashrightarrow 00{:}10{:}58.349$ published and where we saw a parallel

NOTE Confidence: 0.880269895333333

 $00:10:58.349 \longrightarrow 00:11:01.100$ trend between people's mindsets and

 $00:11:01.100 \longrightarrow 00:11:03.800$ outcomes for coronary artery disease

NOTE Confidence: 0.880269895333333

 $00:11:03.800 \longrightarrow 00:11:07.291$ was done by a UK physician in 1950.

NOTE Confidence: 0.880269895333333

 $00:11:07.291 \longrightarrow 00:11:10.846$ Where there was a link.

NOTE Confidence: 0.880269895333333

00:11:10.850 --> 00:11:12.994 Describe between potentially changing

NOTE Confidence: 0.880269895333333

 $00:11:12.994 \longrightarrow 00:11:15.138$ lifestyle and working conditions

NOTE Confidence: 0.880269895333333

 $00:11:15.138 \longrightarrow 00:11:16.760$ and cardiovascular disease.

NOTE Confidence: 0.880269895333333

00:11:16.760 --> 00:11:21.640 And his first letter was met with highly

NOTE Confidence: 0.880269895333333

 $00:11:21.640 \longrightarrow 00:11:25.198$ contested responses to these observations.

NOTE Confidence: 0.880269895333333

 $00:11:25.200 \longrightarrow 00:11:27.664$ So the only thing that this doctor

NOTE Confidence: 0.880269895333333

00:11:27.664 --> 00:11:30.637 Stewart noted was that there was an

NOTE Confidence: 0.880269895333333

 $00{:}11{:}30.637 \dashrightarrow 00{:}11{:}32.481$ increase in cardiovascular disease

NOTE Confidence: 0.880269895333333

00:11:32.481 --> 00:11:34.419 coronary artery disease during

NOTE Confidence: 0.880269895333333

 $00:11:34.420 \longrightarrow 00:11:36.658$ this century is what he describes,

NOTE Confidence: 0.880269895333333

 $00:11:36.660 \longrightarrow 00:11:40.272$ and that the malady mostly effects men

NOTE Confidence: 0.880269895333333

 $00:11:40.272 \longrightarrow 00:11:43.996$ in middle life and in his further the

NOTE Confidence: 0.880269895333333

 $00:11:43.996 \longrightarrow 00:11:46.208$ scription he refers to the work pace

 $00:11:46.208 \longrightarrow 00:11:48.620$ and notes a parallel between the two.

NOTE Confidence: 0.852903004545454

 $00:11:52.030 \longrightarrow 00:11:54.515$ So that was the first publication in

NOTE Confidence: 0.852903004545454

 $00:11:54.515 \longrightarrow 00:11:58.510$ the UK and then a little later in the US

NOTE Confidence: 0.852903004545454

 $00:11:58.510 \longrightarrow 00:12:02.676$ there was a duel of cardiologists that

NOTE Confidence: 0.852903004545454

 $00:12:02.676 \dashrightarrow 00:12:07.548$ presented the work on type A personality,

NOTE Confidence: 0.852903004545454

 $00:12:07.550 \longrightarrow 00:12:10.765$ and Rosamond and Friedman described

NOTE Confidence: 0.852903004545454

 $00:12:10.765 \longrightarrow 00:12:14.734$ as type A personality that was

NOTE Confidence: 0.852903004545454

 $00{:}12{:}14.734 \dashrightarrow 00{:}12{:}17.833$ characterized by an intense Dr.

NOTE Confidence: 0.852903004545454

 $00:12:17.833 \longrightarrow 00:12:19.402$ Need for achievement,

NOTE Confidence: 0.852903004545454

 $00:12:19.402 \longrightarrow 00:12:22.017$ constantly being on the go.

NOTE Confidence: 0.852903004545454

00:12:22.020 --> 00:12:24.333 Being very competitive.

NOTE Confidence: 0.852903004545454

00:12:24.333 --> 00:12:27.963 Hostile and having high anger

NOTE Confidence: 0.852903004545454

 $00{:}12{:}27.963 \dashrightarrow 00{:}12{:}31.764$ and and So what they observed

NOTE Confidence: 0.852903004545454

 $00{:}12{:}31.764 {\:{\circ}{\circ}{\circ}}>00{:}12{:}34.598$ was in this personality profile.

NOTE Confidence: 0.852903004545454

 $00:12:34.598 \longrightarrow 00:12:38.072$ When they contrasted it with other

 $00:12:38.072 \longrightarrow 00:12:40.740$ personality profiles is that they had

NOTE Confidence: 0.852903004545454

00:12:40.740 --> 00:12:43.461 a much higher rate of coronary artery

NOTE Confidence: 0.852903004545454

00:12:43.461 --> 00:12:46.431 disease and also in their subsequent

NOTE Confidence: 0.852903004545454

 $00:12:46.431 \longrightarrow 00:12:49.230$ work described higher mortality rates

NOTE Confidence: 0.852903004545454

 $00:12:49.230 \longrightarrow 00:12:52.505$ linked with this personality profile.

NOTE Confidence: 0.852903004545454

00:12:52.510 --> 00:12:55.898 This construct was only studied in men,

NOTE Confidence: 0.852903004545454

 $00{:}12{:}55.900 \dashrightarrow 00{:}12{:}59.550$ and as the research accrued.

NOTE Confidence: 0.852903004545454

 $00{:}12{:}59.550 \dashrightarrow 00{:}13{:}02.540$ There was some issues with

NOTE Confidence: 0.852903004545454

 $00:13:02.540 \longrightarrow 00:13:05.530$ replication of this work and.

NOTE Confidence: 0.852903004545454

 $00:13:05.530 \longrightarrow 00:13:08.282$ One started to focus on some of the

NOTE Confidence: 0.852903004545454

 $00{:}13{:}08.282 \dashrightarrow 00{:}13{:}11.148$ most toxic aspects of this personality.

NOTE Confidence: 0.852903004545454

00:13:11.150 --> 00:13:13.598 Trade anger and hostility,

NOTE Confidence: 0.852903004545454

 $00{:}13{:}13.598 \dashrightarrow 00{:}13{:}16.990$ which then was studied in isolation.

NOTE Confidence: 0.852903004545454

 $00:13:16.990 \longrightarrow 00:13:19.398$ And and so over time this this research

NOTE Confidence: 0.852903004545454

00:13:19.398 --> 00:13:21.891 line had gotten out of favor because

NOTE Confidence: 0.852903004545454

 $00:13:21.891 \longrightarrow 00:13:23.970$ there were several issues with it.

 $00:13:23.970 \longrightarrow 00:13:25.770$ And so with that overall,

NOTE Confidence: 0.852903004545454

00:13:25.770 --> 00:13:28.760 the study of psychosocial factors

NOTE Confidence: 0.852903004545454

 $00:13:28.760 \longrightarrow 00:13:31.152$ in coronary artery disease.

NOTE Confidence: 0.852903004545454

 $00:13:31.160 \longrightarrow 00:13:36.698$ The enthusiasm for it temporarily lowered.

NOTE Confidence: 0.852903004545454

 $00:13:36.700 \longrightarrow 00:13:39.220$ Until this Canadian dual of researchers

NOTE Confidence: 0.852903004545454

 $00:13:39.220 \longrightarrow 00:13:42.447$ were able to put the interest for

NOTE Confidence: 0.852903004545454

 $00:13:42.447 \longrightarrow 00:13:44.887$ psychosocial factors and cardiac disease

NOTE Confidence: 0.852903004545454

 $00{:}13{:}44.887 \dashrightarrow 00{:}13{:}47.967$ back on the map with their landmark

NOTE Confidence: 0.852903004545454

 $00{:}13{:}47.967 \dashrightarrow 00{:}13{:}51.056$ study published in the 90s in in JAMA,

NOTE Confidence: 0.852903004545454

 $00{:}13{:}51.056 \dashrightarrow 00{:}13{:}53.860$ Nancy, Fraser, Smith and Plasma.

NOTE Confidence: 0.852903004545454

 $00:13:53.860 \longrightarrow 00:13:57.852$ Let's billons they followed in Quebec.

NOTE Confidence: 0.852903004545454

00:13:57.852 --> 00:14:01.092 A population of acute micro

NOTE Confidence: 0.852903004545454

 $00:14:01.092 \longrightarrow 00:14:04.119$ cardial infarction survivors.

NOTE Confidence: 0.852903004545454

 $00:14:04.120 \longrightarrow 00:14:06.730$ 78% of them was male.

NOTE Confidence: 0.852903004545454

 $00:14:06.730 \longrightarrow 00:14:09.670$ And they were interviewed with a

 $00:14:09.670 \longrightarrow 00:14:12.058$ diagnostic interview for Depression 5

NOTE Confidence: 0.852903004545454

 $00:14:12.058 \longrightarrow 00:14:14.515$ to 15 days following the acute event.

NOTE Confidence: 0.852903004545454

 $00:14:14.520 \longrightarrow 00:14:17.028$ And they simply looked at their

NOTE Confidence: 0.852903004545454

 $00:14:17.028 \longrightarrow 00:14:19.364$ survival state at six months

NOTE Confidence: 0.852903004545454

 $00:14:19.364 \longrightarrow 00:14:21.696$ obtained from medical records.

NOTE Confidence: 0.852903004545454

00:14:21.700 --> 00:14:25.010 And what they saw is that upon assessment,

NOTE Confidence: 0.852903004545454

 $00:14:25.010 \longrightarrow 00:14:28.085$ when people had their acute

NOTE Confidence: 0.852903004545454

 $00:14:28.085 \longrightarrow 00:14:29.315$ myocardial infarction,

NOTE Confidence: 0.852903004545454

 $00:14:29.320 \longrightarrow 00:14:32.772$ 16% met the criteria of major depressive

NOTE Confidence: 0.852903004545454

 $00:14:32.772 \longrightarrow 00:14:35.474$ disorder at the time of the interview.

NOTE Confidence: 0.852903004545454

 $00:14:35.480 \longrightarrow 00:14:38.248$ And then at follow-up,

NOTE Confidence: 0.852903004545454

 $00:14:38.248 \longrightarrow 00:14:42.289$ the people who died 50% was

NOTE Confidence: 0.852903004545454

 $00{:}14{:}42.289 \dashrightarrow 00{:}14{:}44.906$ marked as depressed at inclusion.

NOTE Confidence: 0.852903004545454

 $00:14:44.906 \longrightarrow 00:14:47.530$ And so the mortality in the press was

NOTE Confidence: 0.852903004545454

00:14:47.597 --> 00:14:49.847 much higher than the non depressed.

NOTE Confidence: 0.852903004545454

 $00:14:49.850 \longrightarrow 00:14:52.754$ And all of the mortality causes

 $00:14:52.754 \longrightarrow 00:14:54.206$ were cardiac related.

NOTE Confidence: 0.852903004545454

 $00{:}14{:}54.210 \dashrightarrow 00{:}14{:}57.258$ So the risk that they observed was a

NOTE Confidence: 0.852903004545454

00:14:57.258 --> 00:14:59.630 fourfold risk of adverse outcomes.

NOTE Confidence: 0.852903004545454

 $00:14:59.630 \longrightarrow 00:15:02.276$ And so this really opened up this

NOTE Confidence: 0.852903004545454

00:15:02.276 --> 00:15:04.620 line of research again and and

NOTE Confidence: 0.852903004545454

 $00:15:04.620 \longrightarrow 00:15:06.510$ gotten a lot of attention.

NOTE Confidence: 0.852903004545454 00:15:06.510 --> 00:15:06.804 Why? NOTE Confidence: 0.852903004545454

00:15:06.804 --> 00:15:08.568 Why is this a landmark paper,

NOTE Confidence: 0.852903004545454

 $00:15:08.570 \longrightarrow 00:15:10.243$ even though today we would say this

NOTE Confidence: 0.852903004545454

00:15:10.243 --> 00:15:12.306 is a small study, short follow-up,

NOTE Confidence: 0.85290300454545400:15:12.306 --> 00:15:12.794 etcetera. NOTE Confidence: 0.852903004545454

 $00:15:12.794 \longrightarrow 00:15:15.722$ It reopened a discussion of the

NOTE Confidence: 0.852903004545454

 $00:15:15.722 \longrightarrow 00:15:18.394$ importance of psychosocial and behavioral

NOTE Confidence: 0.852903004545454

 $00:15:18.394 \longrightarrow 00:15:21.029$ factors in cardiac disease outcomes.

NOTE Confidence: 0.852903004545454

 $00:15:21.030 \longrightarrow 00:15:23.060$ And by focusing on depression

 $00:15:23.060 \longrightarrow 00:15:24.684$ as opposed to personality,

NOTE Confidence: 0.852903004545454

 $00:15:24.690 \longrightarrow 00:15:27.170$ it offered a manageable explanation,

NOTE Confidence: 0.852903004545454

 $00:15:27.170 \longrightarrow 00:15:29.613$ for which we know treatments for the

NOTE Confidence: 0.852903004545454

00:15:29.613 --> 00:15:32.028 mind body link in cardiac disease,

NOTE Confidence: 0.852903004545454

 $00:15:32.030 \longrightarrow 00:15:34.060$ and importantly this this work for the

NOTE Confidence: 0.852903004545454

 $00:15:34.060 \longrightarrow 00:15:36.249$ first time did not have a gender bias.

NOTE Confidence: 0.852903004545454

00:15:36.250 --> 00:15:38.166 It also included women.

NOTE Confidence: 0.852903004545454

00:15:38.166 --> 00:15:41.646 And it also offered an important concept

NOTE Confidence: 0.852903004545454

 $00:15:41.646 \longrightarrow 00:15:44.730$ that could serve as an explanation

NOTE Confidence: 0.852903004545454

 $00:15:44.730 \longrightarrow 00:15:46.776$ for the racial and gender disparities

NOTE Confidence: 0.852903004545454

 $00{:}15{:}46.776 \dashrightarrow 00{:}15{:}48.594$ that were Dan already described

NOTE Confidence: 0.852903004545454

 $00:15:48.594 \longrightarrow 00:15:50.569$ in in cardiac disease outcomes.

NOTE Confidence: 0.907494502727273

00:15:52.590 --> 00:15:55.542 So since then, people have further

NOTE Confidence: 0.907494502727273

 $00:15:55.542 \longrightarrow 00:15:58.310$ looked at much larger cohorts.

NOTE Confidence: 0.907494502727273

 $00:15:58.310 \longrightarrow 00:16:01.035$ 2000 plus cohorts in in

NOTE Confidence: 0.907494502727273

 $00:16:01.035 \longrightarrow 00:16:03.215$ a variety of populations,

 $00:16:03.220 \longrightarrow 00:16:06.920$ stable coronary artery disease.

NOTE Confidence: 0.907494502727273

 $00:16:06.920 \longrightarrow 00:16:09.040$ As well as outpatients

NOTE Confidence: 0.907494502727273

 $00:16:09.040 \longrightarrow 00:16:10.630$ heart failure patients.

NOTE Confidence: 0.907494502727273

 $00:16:10.630 \longrightarrow 00:16:13.990$ Longer follow-up periods and.

NOTE Confidence: 0.907494502727273 00:16:13.990 --> 00:16:14.830 Essentially, NOTE Confidence: 0.907494502727273

 $00:16:14.830 \longrightarrow 00:16:16.489$ these these observations

NOTE Confidence: 0.907494502727273

 $00:16:16.489 \longrightarrow 00:16:18.148$ were replicated further,

NOTE Confidence: 0.907494502727273

 $00{:}16{:}18.150 \dashrightarrow 00{:}16{:}21.690$ and then the endpoints that one

NOTE Confidence: 0.907494502727273

 $00:16:21.690 \longrightarrow 00:16:24.090$ became attuned to was expanded

NOTE Confidence: 0.907494502727273

00:16:24.090 --> 00:16:27.530 not only to focus on mortality,

NOTE Confidence: 0.907494502727273

00:16:27.530 --> 00:16:30.266 but especially the quality of life.

NOTE Confidence: 0.907494502727273

 $00:16:30.270 \longrightarrow 00:16:32.270$ Of these patients that go

NOTE Confidence: 0.907494502727273

00:16:32.270 --> 00:16:33.470 through this experience,

NOTE Confidence: 0.907494502727273

 $00{:}16{:}33.470 \dashrightarrow 00{:}16{:}35.805$ adherence issues and lifestyle factors

NOTE Confidence: 0.907494502727273

 $00:16:35.805 \longrightarrow 00:16:39.112$ were also related to the study of

00:16:39.112 --> 00:16:41.337 depression in in this population.

NOTE Confidence: 0.883757322

 $00{:}16{:}47.300 \dashrightarrow 00{:}16{:}51.154$ The numbers for today that I would

NOTE Confidence: 0.883757322

 $00:16:51.154 \longrightarrow 00:16:53.933$ like to highlight that overall we we

NOTE Confidence: 0.883757322

 $00:16:53.933 \longrightarrow 00:16:57.195$ find evidence for acute myocardial

NOTE Confidence: 0.883757322

 $00:16:57.195 \longrightarrow 00:16:59.280$ infarction survival survivors.

NOTE Confidence: 0.883757322

00:16:59.280 --> 00:17:01.344 That's about one in five percents

NOTE Confidence: 0.883757322

 $00:17:01.344 \longrightarrow 00:17:03.330$ with a major depressive disorder.

NOTE Confidence: 0.883757322

00:17:03.330 --> 00:17:07.202 And one in three does not meet the

NOTE Confidence: 0.883757322

 $00{:}17{:}07.202 \dashrightarrow 00{:}17{:}09.718$ threshold for major depressive disorder,

NOTE Confidence: 0.883757322

00:17:09.718 --> 00:17:12.298 but still presents with clinically

NOTE Confidence: 0.883757322

00:17:12.298 --> 00:17:13.970 relevant depressive symptoms,

NOTE Confidence: 0.883757322

 $00:17:13.970 \longrightarrow 00:17:16.208$ and it doesn't matter whether people

NOTE Confidence: 0.883757322

 $00{:}17{:}16.208 \dashrightarrow 00{:}17{:}18.676$ meet the formal threshold or have

NOTE Confidence: 0.883757322

 $00{:}17{:}18.676 \dashrightarrow 00{:}17{:}20.047$ increased depressive symptoms.

NOTE Confidence: 0.883757322

 $00:17:20.050 \longrightarrow 00:17:22.702$ They are at risk of subsequent

NOTE Confidence: 0.883757322

 $00:17:22.702 \longrightarrow 00:17:25.210$ adverse outcomes, and that has

 $00:17:25.210 \longrightarrow 00:17:27.370$ been multiple times demonstrated.

NOTE Confidence: 0.883757322

 $00:17:27.370 \longrightarrow 00:17:27.834$ Unfortunately,

NOTE Confidence: 0.883757322

00:17:27.834 --> 00:17:31.082 only a third of patients are recognized

NOTE Confidence: 0.883757322

 $00:17:31.082 \longrightarrow 00:17:34.274$ as such as depressed during their

NOTE Confidence: 0.883757322

 $00:17:34.274 \longrightarrow 00:17:36.458$ acute myocardial infarction admission

NOTE Confidence: 0.883757322

00:17:36.458 --> 00:17:38.682 even when systematic screening

NOTE Confidence: 0.883757322

00:17:38.682 --> 00:17:41.826 programs in hospitals are in place.

NOTE Confidence: 0.883757322

 $00:17:41.830 \longrightarrow 00:17:44.942$ We do find that there is a large

NOTE Confidence: 0.883757322

 $00{:}17{:}44.942 \dashrightarrow 00{:}17{:}46.890$ under recognition of depression,

NOTE Confidence: 0.883757322

 $00:17:46.890 \longrightarrow 00:17:49.389$ and the problem is also tied to

NOTE Confidence: 0.883757322

00:17:49.389 --> 00:17:52.004 the care linkage and the linking

NOTE Confidence: 0.883757322

 $00:17:52.004 \longrightarrow 00:17:53.960$ them to appropriate treatment.

NOTE Confidence: 0.899351694666667

 $00:17:57.780 \longrightarrow 00:18:01.660$ Next, I want to highlight a larger global

NOTE Confidence: 0.899351694666667

 $00:18:01.660 \dashrightarrow 00:18:05.430$ study that has since then been conducted

NOTE Confidence: 0.899351694666667

00:18:05.430 --> 00:18:09.280 and was published in The Lancet in 2004,

 $00:18:09.280 \longrightarrow 00:18:13.412$ which caught a lot of attention in

NOTE Confidence: 0.899351694666667

 $00:18:13.412 \longrightarrow 00:18:16.770$ the space of cardiology and allied.

NOTE Confidence: 0.899351694666667

 $00:18:16.770 \longrightarrow 00:18:18.770$ Specialties that are interested

NOTE Confidence: 0.899351694666667

00:18:18.770 --> 00:18:20.270 in cardiovascular populations,

NOTE Confidence: 0.899351694666667

 $00:18:20.270 \longrightarrow 00:18:23.245$ and this was a case control design

NOTE Confidence: 0.899351694666667

 $00:18:23.250 \longrightarrow 00:18:26.250$ where they studied over 11,000

NOTE Confidence: 0.899351694666667

 $00:18:26.250 \longrightarrow 00:18:29.568$ patients who had suffered their first

NOTE Confidence: 0.899351694666667

00:18:29.568 --> 00:18:32.604 heart attack and they matched them

NOTE Confidence: 0.899351694666667

 $00:18:32.604 \longrightarrow 00:18:36.630$ with age and sex matched controls.

NOTE Confidence: 0.899351694666667

 $00:18:36.630 \longrightarrow 00:18:41.268$ Control set of over 13,000 individuals.

NOTE Confidence: 0.899351694666667

 $00{:}18{:}41.270 \dashrightarrow 00{:}18{:}43.545$ And they recruited them from

NOTE Confidence: 0.899351694666667

00:18:43.545 --> 00:18:45.712 centers around the world, Asia,

NOTE Confidence: 0.899351694666667

00:18:45.712 --> 00:18:47.080 Europe, Middle East, Africa,

NOTE Confidence: 0.899351694666667

 $00:18:47.080 \longrightarrow 00:18:49.756$ Australia and North and South America.

NOTE Confidence: 0.899351694666667

 $00:18:49.760 \longrightarrow 00:18:51.428$ And then they measured

NOTE Confidence: 0.899351694666667

 $00:18:51.428 \longrightarrow 00:18:53.096$ the variety of factors,

 $00{:}18{:}53.100 \dashrightarrow 00{:}18{:}55.200$ the risk factors that are known

NOTE Confidence: 0.899351694666667

 $00:18:55.200 \longrightarrow 00:18:57.432$ to be associated with my cardio,

NOTE Confidence: 0.899351694666667

 $00{:}18{:}57.432 \dashrightarrow 00{:}18{:}58.680$ in farction and psychosocial

NOTE Confidence: 0.899351694666667

 $00:18:58.680 \longrightarrow 00:19:00.760$ stress was one of them.

NOTE Confidence: 0.899351694666667

 $00:19:00.760 \longrightarrow 00:19:03.819$ It was assessed with four simple questions

NOTE Confidence: 0.899351694666667

 $00:19:03.819 \longrightarrow 00:19:06.488$ about stress at work and at home.

NOTE Confidence: 0.899351694666667

 $00:19:06.490 \longrightarrow 00:19:08.485$ Financial stress and major life

NOTE Confidence: 0.899351694666667

00:19:08.485 --> 00:19:11.447 events in the past year and then

NOTE Confidence: 0.899351694666667

00:19:11.447 --> 00:19:13.219 additional questions also ask

NOTE Confidence: 0.899351694666667

 $00:19:13.219 \longrightarrow 00:19:15.939$ people about the locus of control

NOTE Confidence: 0.899351694666667

 $00{:}19{:}15.939 \dashrightarrow 00{:}19{:}18.119$ and the presence of depression.

NOTE Confidence: 0.899351694666667

 $00:19:18.120 \longrightarrow 00:19:21.137$ And here all of these factors that

NOTE Confidence: 0.899351694666667

 $00{:}19{:}21.137 \dashrightarrow 00{:}19{:}23.897$ they studied are listed together and

NOTE Confidence: 0.899351694666667

00:19:23.897 --> 00:19:27.143 put together in a model where the

NOTE Confidence: 0.899351694666667

 $00:19:27.143 \longrightarrow 00:19:30.041$ contribution of how much each individual

00:19:30.041 --> 00:19:32.990 factor contributed to the risk of

NOTE Confidence: 0.899351694666667

 $00{:}19{:}32.990 \dashrightarrow 00{:}19{:}35.440$ acute myocardial infarction was presented.

NOTE Confidence: 0.899351694666667

00:19:35.440 --> 00:19:38.500 Other risk factors studied were smoking,

NOTE Confidence: 0.899351694666667 00:19:38.500 --> 00:19:39.140 diabetes, NOTE Confidence: 0.899351694666667

00:19:39.140 --> 00:19:40.420 hypertension, obesity,

NOTE Confidence: 0.899351694666667

00:19:40.420 --> 00:19:43.620 intake of fruits and vegetables,

NOTE Confidence: 0.899351694666667

 $00:19:43.620 \longrightarrow 00:19:48.300$ exercising alcohol intake and lipid profiles.

NOTE Confidence: 0.899351694666667

 $00:19:48.300 \longrightarrow 00:19:51.708$ And so when you look at

NOTE Confidence: 0.899351694666667

00:19:51.708 --> 00:19:53.412 the psychosocial index,

NOTE Confidence: 0.899351694666667

00:19:53.420 --> 00:19:57.290 you see that it was a robust predictor of

NOTE Confidence: 0.899351694666667

00:19:57.290 --> 00:20:00.359 experiencing and acute myocardial infarction.

NOTE Confidence: 0.899351694666667

 $00:20:00.360 \longrightarrow 00:20:03.768$ And in this column they also calculated the

NOTE Confidence: 0.899351694666667

00:20:03.768 --> 00:20:05.829 population attributable attributable risk,

NOTE Confidence: 0.899351694666667

 $00:20:05.830 \longrightarrow 00:20:08.680$ which is the proportion of the

NOTE Confidence: 0.899351694666667

00:20:08.680 --> 00:20:11.622 incidents of getting an AMI in

NOTE Confidence: 0.899351694666667

 $00:20:11.622 \longrightarrow 00:20:13.997$ the population between those who

 $00:20:13.997 \longrightarrow 00:20:16.776$ are exposed to particular risk

NOTE Confidence: 0.899351694666667

 $00:20:16.776 \longrightarrow 00:20:19.300$ factors versus non exposed.

NOTE Confidence: 0.899351694666667

 $00:20:19.300 \longrightarrow 00:20:23.072$ Is calculated and so if you focus

NOTE Confidence: 0.899351694666667

 $00:20:23.072 \longrightarrow 00:20:26.848$ on the rate for women it has a

NOTE Confidence: 0.899351694666667

 $00:20:26.848 \longrightarrow 00:20:29.938$ population attributable risk of 40%.

NOTE Confidence: 0.899351694666667

00:20:29.940 --> 00:20:32.676 And so if you translate that that's 40,

NOTE Confidence: 0.899351694666667

 $00:20:32.680 \longrightarrow 00:20:34.668$ it means that 40% of the incidence

NOTE Confidence: 0.899351694666667

 $00:20:34.668 \longrightarrow 00:20:36.511$ of an acute myocardial infarction

NOTE Confidence: 0.899351694666667

00:20:36.511 --> 00:20:39.350 in women is due to the exposure

NOTE Confidence: 0.899351694666667

 $00{:}20{:}39.350 \dashrightarrow 00{:}20{:}40.878$ of psychosocial risk factors.

NOTE Confidence: 0.899351694666667

 $00{:}20{:}40.880 \dashrightarrow 00{:}20{:}43.336$ So that was an eye opening study also

NOTE Confidence: 0.899351694666667

 $00:20:43.336 \longrightarrow 00:20:46.015$ for the larger medical community to

NOTE Confidence: 0.899351694666667

 $00{:}20{:}46.015 \dashrightarrow 00{:}20{:}49.003$ acknowledge the role of psychosocial factors.

NOTE Confidence: 0.899351694666667

00:20:49.010 --> 00:20:50.778 In cardiovascular disease and

NOTE Confidence: 0.899351694666667

00:20:50.778 --> 00:20:52.546 in acute myocardial infarction,

 $00:20:52.550 \longrightarrow 00:20:53.340$ in particular.

NOTE Confidence: 0.8244064

00:20:56.120 --> 00:21:00.280 So with all this work and follow up,

NOTE Confidence: 0.8244064

 $00:21:00.280 \longrightarrow 00:21:01.815$ it became clear that stress

NOTE Confidence: 0.8244064

 $00:21:01.815 \longrightarrow 00:21:03.350$ is a significant risk factor

NOTE Confidence: 0.8244064

 $00:21:03.405 \longrightarrow 00:21:04.937$ for coronary artery disease.

NOTE Confidence: 0.8244064

00:21:04.940 --> 00:21:06.448 Both incidents and progression.

NOTE Confidence: 0.8244064

 $00:21:06.448 \longrightarrow 00:21:07.956$ It is very common.

NOTE Confidence: 0.8244064

 $00:21:07.960 \longrightarrow 00:21:10.088$ It can be confused with cardiac symptoms.

NOTE Confidence: 0.8244064

 $00:21:10.090 \longrightarrow 00:21:12.772$ It is linked to behavioral and

NOTE Confidence: 0.8244064

00:21:12.772 --> 00:21:14.113 cardiovascular risk factors,

NOTE Confidence: 0.8244064

 $00:21:14.120 \longrightarrow 00:21:16.490$ and it really forms a barrier

NOTE Confidence: 0.8244064

 $00:21:16.490 \longrightarrow 00:21:17.675$ for medical interventions.

NOTE Confidence: 0.8244064

00:21:17.680 --> 00:21:20.466 And also sometimes it may be a

NOTE Confidence: 0.8244064

 $00{:}21{:}20.466 \longrightarrow 00{:}21{:}22.320$ direct trigger for experiencing

NOTE Confidence: 0.8244064

 $00:21:22.320 \longrightarrow 00:21:25.165$ acute cardiac events such as.

NOTE Confidence: 0.8244064

 $00:21:25.170 \longrightarrow 00:21:28.098$ Anger has been linked with the

 $00:21:28.098 \longrightarrow 00:21:30.700$ experience of an acute event.

NOTE Confidence: 0.86218501

00:21:33.250 --> 00:21:36.230 Since this research was proposed,

NOTE Confidence: 0.86218501

 $00:21:36.230 \longrightarrow 00:21:39.480$ many also studied underlying mechanisms

NOTE Confidence: 0.86218501

 $00:21:39.480 \longrightarrow 00:21:44.052$ that would explain why stress is linked

NOTE Confidence: 0.86218501

 $00:21:44.052 \longrightarrow 00:21:47.112$ to atherosclerosis and the following

NOTE Confidence: 0.86218501

 $00:21:47.112 \longrightarrow 00:21:50.688$ model has been proposed as the underlying

NOTE Confidence: 0.86218501

 $00:21:50.688 \longrightarrow 00:21:53.720$ stress model for cardiovascular disease.

NOTE Confidence: 0.86218501

 $00{:}21{:}53.720 \dashrightarrow 00{:}21{:}57.595$ Now with atherosclerosis as the

NOTE Confidence: 0.86218501

 $00:21:57.595 \longrightarrow 00:21:59.679$ underlying pathological process,

NOTE Confidence: 0.86218501

 $00{:}21{:}59.679 \dashrightarrow 00{:}22{:}02.853$ so chronic stress and affective disorders

NOTE Confidence: 0.86218501

 $00:22:02.853 \longrightarrow 00:22:06.928$ that lead to the activation of the HP

NOTE Confidence: 0.86218501

 $00:22:06.928 \longrightarrow 00:22:10.000$ axis and the sympathetic nervous system.

NOTE Confidence: 0.86218501

 $00:22:10.000 \longrightarrow 00:22:12.580$ And it further affects our behaviors,

NOTE Confidence: 0.86218501

 $00:22:12.580 \longrightarrow 00:22:15.804$ how our health behaviors and and due to

NOTE Confidence: 0.86218501

 $00:22:15.804 \longrightarrow 00:22:18.816$ the prolonged activation and the imbalance

00:22:18.816 --> 00:22:21.476 of the sympathetic nervous system,

NOTE Confidence: 0.86218501

00:22:21.480 --> 00:22:23.259 there are heightened

NOTE Confidence: 0.86218501

00:22:23.259 --> 00:22:25.038 physiological responsiveness to,

NOTE Confidence: 0.86218501

 $00:22:25.040 \longrightarrow 00:22:26.642$ to acute stressors.

NOTE Confidence: 0.86218501

 $00:22:26.642 \longrightarrow 00:22:29.312$ Also interactions with chronic stressors

NOTE Confidence: 0.86218501

 $00:22:29.312 \longrightarrow 00:22:32.658$ that further cause more downstream effects,

NOTE Confidence: 0.86218501

00:22:32.660 --> 00:22:35.900 such as the ones listed on the right,

NOTE Confidence: 0.86218501

 $00:22:35.900 \longrightarrow 00:22:37.310$ increased inflammation,

NOTE Confidence: 0.86218501

 $00:22:37.310 \longrightarrow 00:22:40.130$ platelet reactivity and endothelial.

NOTE Confidence: 0.86218501

 $00:22:40.130 \longrightarrow 00:22:42.618$ Dysfunction to name a few of those effects.

NOTE Confidence: 0.879770255333334

00:22:45.890 --> 00:22:47.738 So following these insights,

NOTE Confidence: 0.879770255333334

 $00:22:47.738 \longrightarrow 00:22:51.205$ people also came together to design several

NOTE Confidence: 0.879770255333334

 $00:22:51.205 \longrightarrow 00:22:54.554$ interventions to address depression as a

NOTE Confidence: 0.879770255333334

 $00:22:54.554 \longrightarrow 00:22:56.714$ risk factor for cardiovascular disease

NOTE Confidence: 0.879770255333334

 $00:22:56.714 \longrightarrow 00:22:59.270$ and depression and stress reduction.

NOTE Confidence: 0.879770255333334

 $00:22:59.270 \longrightarrow 00:23:02.035$ Interventions have been developed and

 $00:23:02.035 \longrightarrow 00:23:05.575$ tested mostly in coronary populations and

NOTE Confidence: 0.879770255333334

 $00:23:05.575 \longrightarrow 00:23:09.080$ the most prominent ones highlighted here.

NOTE Confidence: 0.879770255333334

 $00:23:09.080 \longrightarrow 00:23:11.978$ And so these trials they overall were

NOTE Confidence: 0.879770255333334

00:23:11.978 --> 00:23:14.040 successful in improving depression,

NOTE Confidence: 0.879770255333334

00:23:14.040 --> 00:23:16.160 symptoms, quality of life.

NOTE Confidence: 0.879770255333334

 $00:23:16.160 \longrightarrow 00:23:18.810$ But at the same time,

NOTE Confidence: 0.879770255333334

 $00:23:18.810 \longrightarrow 00:23:20.903$ the hopes and the fields were high

NOTE Confidence: 0.879770255333334

 $00{:}23{:}20.903 \dashrightarrow 00{:}23{:}23.357$ also to be able to reduce adverse

NOTE Confidence: 0.879770255333334

 $00:23:23.357 \longrightarrow 00:23:26.699$ cardiovascular events and which did not

NOTE Confidence: 0.879770255333334

 $00{:}23{:}26.699 \dashrightarrow 00{:}23{:}29.769$ materialize for many of these trials.

NOTE Confidence: 0.879770255333334

 $00:23:29.770 \longrightarrow 00:23:32.563$ Often due to the ways the studies

NOTE Confidence: 0.879770255333334

00:23:32.563 --> 00:23:34.995 were designed or powered, however,

NOTE Confidence: 0.879770255333334

00:23:34.995 --> 00:23:38.600 this trial out of Sweden which focused

NOTE Confidence: 0.879770255333334

 $00:23:38.600 \longrightarrow 00:23:41.980$ specifically on women who survived an

NOTE Confidence: 0.879770255333334

00:23:41.980 --> 00:23:44.840 acute myocardial infarction or underwent

 $00:23:44.936 \longrightarrow 00:23:48.020$ a major coronary revascularization.

NOTE Confidence: 0.879770255333334

 $00:23:48.020 \longrightarrow 00:23:53.100$ They offered these women a program where

NOTE Confidence: 0.879770255333334

 $00:23:53.100 \longrightarrow 00:23:56.820$ the focus was on psychoeducation stress

NOTE Confidence: 0.879770255333334

00:23:56.820 --> 00:23:59.468 reduction through relaxation training,

NOTE Confidence: 0.879770255333334

 $00:23:59.468 \longrightarrow 00:24:00.820$ self monitoring,

NOTE Confidence: 0.879770255333334

00:24:00.820 --> 00:24:02.932 cognitive restructuring and to

NOTE Confidence: 0.879770255333334

 $00:24:02.932 \longrightarrow 00:24:06.100$ realize a more adaptive coping skill

NOTE Confidence: 0.879770255333334

 $00:24:06.183 \longrightarrow 00:24:08.535$ set when they were dealing with

NOTE Confidence: 0.879770255333334

 $00{:}24{:}08.535 \dashrightarrow 00{:}24{:}10.650$ family and work related stressors.

NOTE Confidence: 0.879770255333334

 $00:24:10.650 \longrightarrow 00:24:13.779$ Ends simultaneously also focus on self care

NOTE Confidence: 0.879770255333334

00:24:13.779 --> 00:24:16.610 and compliance with the medical regimen,

NOTE Confidence: 0.879770255333334

 $00:24:16.610 \longrightarrow 00:24:20.074$ and so this trial did show a significant

NOTE Confidence: 0.879770255333334

 $00:24:20.074 \longrightarrow 00:24:22.441$ survival effect that was actually

NOTE Confidence: 0.879770255333334

 $00:24:22.441 \longrightarrow 00:24:24.801$ threefold in comparison with the

NOTE Confidence: 0.879770255333334

 $00:24:24.801 \longrightarrow 00:24:27.862$ usual care for long term mortality.

NOTE Confidence: 0.879770255333334

 $00{:}24{:}27.862 \longrightarrow 00{:}24{:}32.460$ So so these are some of the critical

 $00:24:32.460 \longrightarrow 00:24:35.516$ trials that were conducted,

NOTE Confidence: 0.879770255333334

 $00{:}24{:}35.516 \dashrightarrow 00{:}24{:}38.696$ and our colleague Matthew Berg,

NOTE Confidence: 0.879770255333334 00:24:38.700 --> 00:24:39.252 Dr Burke, NOTE Confidence: 0.879770255333334

 $00:24:39.252 \longrightarrow 00:24:41.184$ was also one of the key pioneers

NOTE Confidence: 0.879770255333334

 $00:24:41.184 \longrightarrow 00:24:42.390$ of many of those.

NOTE Confidence: 0.879770255333334

 $00:24:42.390 \longrightarrow 00:24:45.338$ Interventions that were tested

NOTE Confidence: 0.879770255333334

00:24:45.338 --> 00:24:48.286 in coronary artery populations,

NOTE Confidence: 0.879770255333334

 $00:24:48.290 \longrightarrow 00:24:51.536$ so all of these developments in

NOTE Confidence: 0.879770255333334

 $00:24:51.536 \longrightarrow 00:24:53.700$ the cardiovascular population gave

NOTE Confidence: 0.879770255333334

 $00:24:53.787 \longrightarrow 00:24:56.538$ rise to what we now today referred

NOTE Confidence: 0.879770255333334

00:24:56.538 --> 00:24:58.710 to as cardiac psychology,

NOTE Confidence: 0.879770255333334

 $00:24:58.710 \longrightarrow 00:25:02.334$ and it was described in in these works.

NOTE Confidence: 0.879770255333334

 $00{:}25{:}02.340 \dashrightarrow 00{:}25{:}04.872$ That that this is really a

NOTE Confidence: 0.879770255333334

 $00:25:04.872 \longrightarrow 00:25:06.560$ subspecialization of health psychology.

NOTE Confidence: 0.879770255333334

 $00:25:06.560 \longrightarrow 00:25:08.228$ And, as I mentioned,

 $00{:}25{:}08.228 \dashrightarrow 00{:}25{:}09.896$ colleague Doctor Matthew Burke

NOTE Confidence: 0.879770255333334

 $00{:}25{:}09.896 \dashrightarrow 00{:}25{:}13.007$ being one of the lead figures of

NOTE Confidence: 0.879770255333334

 $00{:}25{:}13.007 \dashrightarrow 00{:}25{:}15.468$ this subspecialization The EPA also

NOTE Confidence: 0.879770255333334

00:25:15.468 --> 00:25:18.624 recognizes this term of cardiac psychology,

NOTE Confidence: 0.879770255333334

 $00:25:18.630 \longrightarrow 00:25:22.116$ although it it does label it as

NOTE Confidence: 0.879770255333334

 $00:25:22.116 \longrightarrow 00:25:23.610$ an emerging subspecialty.

NOTE Confidence: 0.879770255333334

 $00:25:23.610 \longrightarrow 00:25:25.906$ So it's still very much under development.

NOTE Confidence: 0.873615242

 $00:25:28.500 \longrightarrow 00:25:31.560$ So in what comes next?

NOTE Confidence: 0.873615242

 $00:25:31.560 \longrightarrow 00:25:33.884$ I want to make the case that.

NOTE Confidence: 0.873615242

00:25:33.890 --> 00:25:36.200 Hard mind and vascular really are so

NOTE Confidence: 0.873615242

 $00:25:36.200 \longrightarrow 00:25:38.384$ intertwined that we should be looking

NOTE Confidence: 0.873615242

 $00:25:38.384 \longrightarrow 00:25:40.269$ at the spectrum of cardiovascular

NOTE Confidence: 0.873615242

 $00{:}25{:}40.269 \dashrightarrow 00{:}25{:}42.481$ diseases and also when we think

NOTE Confidence: 0.873615242

 $00{:}25{:}42.481 \dashrightarrow 00{:}25{:}44.221$ about psychosocial factors and keep

NOTE Confidence: 0.873615242

00:25:44.221 --> 00:25:47.180 that whole entire spectrum in mind.

NOTE Confidence: 0.873615242

 $00:25:47.180 \longrightarrow 00:25:49.345$ And it also highlights the

 $00:25:49.345 \longrightarrow 00:25:51.077$ need for further support.

NOTE Confidence: 0.873615242

 $00{:}25{:}51.080 \dashrightarrow 00{:}25{:}52.262$ Specialization and expansion.

NOTE Confidence: 0.873615242

 $00:25:52.262 \longrightarrow 00:25:54.626$ Early insights in these populations

NOTE Confidence: 0.873615242

 $00:25:54.626 \longrightarrow 00:25:56.978$ and our treatment models and how we

NOTE Confidence: 0.873615242

 $00:25:56.978 \longrightarrow 00:25:58.580$ translate them to clinical care.

NOTE Confidence: 0.810794074952381

 $00:26:01.430 \longrightarrow 00:26:05.112$ As you all know, atherosclerosis is a

NOTE Confidence: 0.810794074952381

 $00:26:05.112 \longrightarrow 00:26:07.447$ generalized disease and significant

NOTE Confidence: 0.810794074952381

 $00{:}26{:}07.447 \dashrightarrow 00{:}26{:}10.103$ ather othrombotic events may manifest

NOTE Confidence: 0.810794074952381

 $00:26:10.103 \longrightarrow 00:26:13.950$ in different arteries of the body.

NOTE Confidence: 0.810794074952381

 $00:26:13.950 \longrightarrow 00:26:15.882$ It may happen in in your carotid

NOTE Confidence: 0.810794074952381

00:26:15.882 --> 00:26:18.308 artery in in lower extremity arteries,

NOTE Confidence: 0.810794074952381

 $00:26:18.310 \longrightarrow 00:26:20.558$ and much of our work has focused on

NOTE Confidence: 0.810794074952381

 $00{:}26{:}20.558 \dashrightarrow 00{:}26{:}22.949$ on that lower extremity population,

NOTE Confidence: 0.810794074952381

00:26:22.950 --> 00:26:24.429 peripheral artery disease,

NOTE Confidence: 0.810794074952381

 $00:26:24.429 \longrightarrow 00:26:27.387$ or PAD as one refers to.

 $00:26:27.390 \longrightarrow 00:26:30.505$ And it is often still a very

NOTE Confidence: 0.810794074952381

 $00:26:30.505 \longrightarrow 00:26:31.395$ underrecognized condition,

NOTE Confidence: 0.810794074952381

 $00:26:31.400 \longrightarrow 00:26:33.626$ for which there is great unawareness

NOTE Confidence: 0.810794074952381

 $00:26:33.626 \longrightarrow 00:26:35.110$ and also under treatment.

NOTE Confidence: 0.810794074952381

 $00:26:35.110 \longrightarrow 00:26:38.001$ And what we see is that the

NOTE Confidence: 0.810794074952381

 $00{:}26{:}38.001 \dashrightarrow 00{:}26{:}39.746$ cardiovascular event rates are

NOTE Confidence: 0.810794074952381

 $00:26:39.746 \longrightarrow 00:26:42.693$ often worse than as we see for

NOTE Confidence: 0.810794074952381

 $00:26:42.693 \longrightarrow 00:26:44.230$ coronary populations because.

NOTE Confidence: 0.810794074952381

 $00:26:44.230 \longrightarrow 00:26:46.936$ That field has progressed so much

NOTE Confidence: 0.810794074952381

 $00:26:46.936 \longrightarrow 00:26:49.300$ further and risk management and

NOTE Confidence: 0.810794074952381

 $00{:}26{:}49.300 \dashrightarrow 00{:}26{:}51.224$ and recognition and population

NOTE Confidence: 0.810794074952381

 $00:26:51.224 \longrightarrow 00:26:53.629$ awareness as opposed to other.

NOTE Confidence: 0.810794074952381

 $00{:}26{:}53.630 \dashrightarrow 00{:}26{:}55.274$ Ather othrombotic diseases on

NOTE Confidence: 0.810794074952381

 $00:26:55.274 \longrightarrow 00:26:56.918$ the cardiovascular spectrum.

NOTE Confidence: 0.78728296

00:26:59.470 --> 00:27:01.030 Before I highlight on PED,

NOTE Confidence: 0.78728296

 $00:27:01.030 \longrightarrow 00:27:04.396$ I also want to make a mention

00:27:04.396 --> 00:27:05.844 of the REACH registry,

NOTE Confidence: 0.78728296

 $00{:}27{:}05.850 \dashrightarrow 00{:}27{:}08.586$ which was another big global study,

NOTE Confidence: 0.78728296

 $00:27:08.590 \longrightarrow 00:27:12.720$ a landmark study that studied the spectrum

NOTE Confidence: 0.78728296

 $00:27:12.720 \longrightarrow 00:27:17.200$ of atherosclerosis in a global setting.

NOTE Confidence: 0.78728296

 $00:27:17.200 \longrightarrow 00:27:19.824$ And the strength of that study was that

NOTE Confidence: 0.78728296

00:27:19.824 --> 00:27:23.117 it it focused on coronary artery disease,

NOTE Confidence: 0.78728296

00:27:23.120 --> 00:27:24.260 peripheral artery disease,

NOTE Confidence: 0.78728296

 $00{:}27{:}24.260 \dashrightarrow 00{:}27{:}25.400$ and cerebrovascular disease,

NOTE Confidence: 0.78728296

 $00:27:25.400 \longrightarrow 00:27:28.220$ but really demonstrated that these are

NOTE Confidence: 0.78728296

 $00:27:28.220 \longrightarrow 00:27:30.760$ manifestations of the same process.

NOTE Confidence: 0.78728296

00:27:30.760 --> 00:27:32.980 Many people have overlapping disease,

NOTE Confidence: 0.78728296

 $00{:}27{:}32.980 \dashrightarrow 00{:}27{:}36.536$ and it also contrasted some of the

NOTE Confidence: 0.78728296

00:27:36.536 --> 00:27:39.344 differences in outcomes and under

NOTE Confidence: 0.78728296

 $00:27:39.344 \longrightarrow 00:27:41.736$ treatment for these conditions.

NOTE Confidence: 0.78728296

 $00:27:41.740 \longrightarrow 00:27:44.197$ So there was also a cohort of PD patients,

 $00:27:44.200 \longrightarrow 00:27:46.512$ and as you see there is much overlap

NOTE Confidence: 0.78728296

 $00:27:46.512 \longrightarrow 00:27:48.388$ with coronary artery disease as

NOTE Confidence: 0.78728296

 $00:27:48.388 \longrightarrow 00:27:50.040$ well as cerebrovascular disease.

NOTE Confidence: 0.78728296

00:27:50.040 --> 00:27:52.205 So patients may never present

NOTE Confidence: 0.78728296

00:27:52.205 --> 00:27:54.370 with with an isolated condition.

NOTE Confidence: 0.78728296

 $00{:}27{:}54.370 \dashrightarrow 00{:}27{:}56.465$ There's always that broader conglomerate

NOTE Confidence: 0.78728296

 $00:27:56.465 \longrightarrow 00:27:59.597$ of risk that we need to be in mind,

NOTE Confidence: 0.78728296

 $00:27:59.600 \longrightarrow 00:28:03.338$ and it depends on where the

NOTE Confidence: 0.78728296

 $00:28:03.338 \longrightarrow 00:28:05.207$ ather othrombotic events manifest

NOTE Confidence: 0.78728296

 $00:28:05.207 \longrightarrow 00:28:08.670$ first as to what you're presenting.

NOTE Confidence: 0.78728296

 $00{:}28{:}08.670 \dashrightarrow 00{:}28{:}10.806$ Complaint is and how you entered

NOTE Confidence: 0.78728296

 $00{:}28{:}10.806 \dashrightarrow 00{:}28{:}12.580$ the system for cardiovascular care.

NOTE Confidence: 0.813028042

 $00{:}28{:}17.030 \dashrightarrow 00{:}28{:}20.998$ So the PD disease burden to give you

NOTE Confidence: 0.813028042

 $00:28:20.998 \longrightarrow 00:28:24.174$ an idea when people present with PD is

NOTE Confidence: 0.813028042

 $00:28:24.174 \longrightarrow 00:28:27.713$ it's often a marker of very aggressive

NOTE Confidence: 0.813028042

 $00{:}28{:}27.713 \dashrightarrow 00{:}28{:}29.717$ generalized atherosclerotic disease.

 $00:28:29.720 \longrightarrow 00:28:32.792$ And resulting in in reduced what

NOTE Confidence: 0.813028042

 $00{:}28{:}32.792 \dashrightarrow 00{:}28{:}36.555$ filling their leg arteries and over 200

NOTE Confidence: 0.813028042

 $00:28:36.555 \longrightarrow 00:28:39.265$ million people are affected globally.

NOTE Confidence: 0.813028042

00:28:39.270 --> 00:28:41.290 And in the US alone,

NOTE Confidence: 0.813028042

 $00:28:41.290 \longrightarrow 00:28:44.748$ we have a population of over 8,000,000,

NOTE Confidence: 0.813028042

 $00{:}28{:}44.750 \dashrightarrow 00{:}28{:}47.040$ and so it's on the rise in both high income

NOTE Confidence: 0.813028042

00:28:47.097 --> 00:28:49.386 and low income and middle income countries.

NOTE Confidence: 0.813028042

 $00:28:49.390 \longrightarrow 00:28:50.698$ Both men and women.

NOTE Confidence: 0.813028042

 $00{:}28{:}50.698 \dashrightarrow 00{:}28{:}53.136$ And it's rapidly growing due to the

NOTE Confidence: 0.813028042

 $00:28:53.136 \longrightarrow 00:28:55.596$ aging population and steady increase in

NOTE Confidence: 0.813028042

 $00:28:55.596 \longrightarrow 00:28:58.280$ obesity and diabetes rates and and so

NOTE Confidence: 0.813028042

 $00:28:58.280 \longrightarrow 00:29:00.356$ it's a serious public health problem.

NOTE Confidence: 0.79750719125

00:29:02.440 --> 00:29:05.195 Katie can present as a

NOTE Confidence: 0.79750719125

00:29:05.195 --> 00:29:06.848 spectrum of manifestations.

NOTE Confidence: 0.79750719125

 $00:29:06.850 \longrightarrow 00:29:08.800$ There's people who don't know

 $00:29:08.800 \longrightarrow 00:29:11.556$ they have it but and are labeled

NOTE Confidence: 0.79750719125

 $00{:}29{:}11.556 \dashrightarrow 00{:}29{:}14.604$ as asymptomatic when they do

NOTE Confidence: 0.79750719125

00:29:14.604 --> 00:29:16.617 undergo noninvasive testing.

NOTE Confidence: 0.79750719125

 $00:29:16.620 \longrightarrow 00:29:18.145$ They might see that there's

NOTE Confidence: 0.79750719125

 $00:29:18.145 \longrightarrow 00:29:19.060$ reduced Platt flow,

NOTE Confidence: 0.79750719125

 $00:29:19.060 \longrightarrow 00:29:23.330$ but do not present with active symptoms.

NOTE Confidence: 0.79750719125

 $00:29:23.330 \longrightarrow 00:29:25.750$ And often that is because

NOTE Confidence: 0.79750719125

 $00:29:25.750 \longrightarrow 00:29:27.686$ of a sedentary lifestyle.

NOTE Confidence: 0.79750719125

 $00{:}29{:}27.690 \dashrightarrow 00{:}29{:}30.030$ But these patients are also at

NOTE Confidence: 0.79750719125

00:29:30.030 --> 00:29:32.131 risk of having adverse outcomes

NOTE Confidence: 0.79750719125

 $00{:}29{:}32.131 \dashrightarrow 00{:}29{:}34.909$ and then further down the spectrum.

NOTE Confidence: 0.79750719125

 $00:29:34.910 \longrightarrow 00:29:37.098$ There are symptomatic manifestations,

NOTE Confidence: 0.79750719125

 $00:29:37.098 \longrightarrow 00:29:41.280$ pain while walking that has a different.

NOTE Confidence: 0.79750719125

 $00:29:41.280 \longrightarrow 00:29:43.265$ Gradations of severity and then

NOTE Confidence: 0.79750719125

 $00:29:43.265 \longrightarrow 00:29:46.265$ towards the end we have critical limb

NOTE Confidence: 0.79750719125

 $00:29:46.265 \longrightarrow 00:29:48.141$ is chemia manifestations where the

00:29:48.141 --> 00:29:51.396 limb is really in danger and people

NOTE Confidence: 0.79750719125

 $00{:}29{:}51.396 \to 00{:}29{:}53.994$ are dealing with non healing wounds,

NOTE Confidence: 0.79750719125

00:29:54.000 --> 00:29:57.220 wounds and a high risk of amputation.

NOTE Confidence: 0.79750719125

00:29:57.220 --> 00:30:00.279 So people if patients present with PD

NOTE Confidence: 0.79750719125

 $00:30:00.279 \longrightarrow 00:30:04.100$ in spite of optimal medical management,

NOTE Confidence: 0.79750719125

 $00:30:04.100 \longrightarrow 00:30:06.758$ the residual risk for major adverse

NOTE Confidence: 0.79750719125

00:30:06.758 --> 00:30:08.530 cardiovascular events and live

NOTE Confidence: 0.79750719125

 $00:30:08.606 \longrightarrow 00:30:10.982$ events is about 5 to 10% per year,

NOTE Confidence: 0.79750719125

 $00:30:10.982 \longrightarrow 00:30:12.506$ which is pretty high.

NOTE Confidence: 0.79750719125

 $00:30:12.510 \longrightarrow 00:30:14.076$ If we look at critical limits,

NOTE Confidence: 0.79750719125

 $00:30:14.080 \longrightarrow 00:30:18.736$ chemia one in five has does not

NOTE Confidence: 0.79750719125

 $00:30:18.736 \longrightarrow 00:30:21.600$ survive at 6 to months to a year

NOTE Confidence: 0.79750719125

 $00{:}30{:}21.690 \dashrightarrow 00{:}30{:}24.438$ and about half of the patients

NOTE Confidence: 0.79750719125

00:30:24.438 --> 00:30:26.878 would seali does not survive.

NOTE Confidence: 0.79750719125

 $00:30:26.878 \longrightarrow 00:30:28.396$ At five years.

 $00:30:28.400 \longrightarrow 00:30:30.990$ It is also very costly and most

NOTE Confidence: 0.79750719125

 $00{:}30{:}30.990 \dashrightarrow 00{:}30{:}33.172$ of the expenditures are incurred

NOTE Confidence: 0.79750719125

00:30:33.172 --> 00:30:35.156 for people's inpatient care,

NOTE Confidence: 0.79750719125

 $00:30:35.160 \longrightarrow 00:30:40.664$ which often consists of a lot of repeat

NOTE Confidence: 0.79750719125

 $00:30:40.664 \longrightarrow 00:30:44.160$ revascularizations and complicated stays.

NOTE Confidence: 0.79750719125

 $00:30:44.160 \longrightarrow 00:30:46.360$ Same risk factors as the

NOTE Confidence: 0.79750719125

00:30:46.360 --> 00:30:47.680 coronary artery disease.

NOTE Confidence: 0.79750719125

00:30:47.680 --> 00:30:48.253 However,

NOTE Confidence: 0.79750719125

 $00:30:48.253 \longrightarrow 00:30:48.826$ smoking,

NOTE Confidence: 0.79750719125 00:30:48.826 --> 00:30:49.399 obesity,

NOTE Confidence: 0.79750719125

 $00:30:49.399 \longrightarrow 00:30:53.410$ and aging are one of the more

NOTE Confidence: 0.79750719125

 $00:30:53.518 \longrightarrow 00:30:56.418$ prominent ones as well as

NOTE Confidence: 0.79750719125

00:30:56.418 --> 00:31:00.114 diabetes and a lot of people with

NOTE Confidence: 0.79750719125

 $00:31:00.114 \longrightarrow 00:31:02.190$ this condition also develop.

NOTE Confidence: 0.79750719125

 $00:31:02.190 \longrightarrow 00:31:03.978$ Chronic kidney disease.

NOTE Confidence: 0.79750719125

 $00{:}31{:}03.978 \dashrightarrow 00{:}31{:}06.590$ And so the disease profile

 $00:31:06.590 \longrightarrow 00:31:07.820$ is fairly complex.

NOTE Confidence: 0.874462065882353

 $00:31:10.290 \longrightarrow 00:31:12.126$ So despite the magnitude of the

NOTE Confidence: 0.874462065882353

 $00:31:12.126 \longrightarrow 00:31:14.174$ problem and the role of lifestyle

NOTE Confidence: 0.874462065882353

00:31:14.174 --> 00:31:16.069 factors also for this condition,

NOTE Confidence: 0.874462065882353

 $00:31:16.070 \longrightarrow 00:31:17.855$ there's only been recent interest

NOTE Confidence: 0.874462065882353

 $00:31:17.855 \longrightarrow 00:31:21.067$ that there has been a focus on studies

NOTE Confidence: 0.874462065882353

00:31:21.067 --> 00:31:23.337 psychosocial factors in this condition,

NOTE Confidence: 0.874462065882353

 $00:31:23.340 \longrightarrow 00:31:25.734$ with most of the work highlighting

NOTE Confidence: 0.874462065882353

 $00:31:25.734 \longrightarrow 00:31:28.437$ the role of depression and in this

NOTE Confidence: 0.874462065882353

 $00:31:28.437 \longrightarrow 00:31:30.282$ illustrating that the prevalence really

NOTE Confidence: 0.874462065882353

 $00:31:30.282 \longrightarrow 00:31:33.219$ is very similar to the ones reported

NOTE Confidence: 0.874462065882353

 $00:31:33.219 \longrightarrow 00:31:35.349$ in coronary artery disease populations,

NOTE Confidence: 0.874462065882353

 $00{:}31{:}35.350 \dashrightarrow 00{:}31{:}37.336$ both in stable populations as well

NOTE Confidence: 0.874462065882353

 $00:31:37.336 \longrightarrow 00:31:39.350$ as in people undergoing procedures,

NOTE Confidence: 0.874462065882353

 $00:31:39.350 \longrightarrow 00:31:43.190$ as demonstrated. Year across these cohorts.

 $00:31:45.390 \longrightarrow 00:31:48.253$ Also concerning is that in the US

NOTE Confidence: 0.861377631538461

 $00:31:48.253 \longrightarrow 00:31:52.296$ this is a sample that we studied a

NOTE Confidence: 0.861377631538461

 $00:31:52.296 \longrightarrow 00:31:55.480$ national sample of inpatient admissions.

NOTE Confidence: 0.861377631538461

 $00:31:55.480 \longrightarrow 00:31:59.170$ Where we see a rise in those admissions over

NOTE Confidence: 0.861377631538461

 $00:31:59.248 \longrightarrow 00:32:02.398$ the last decade for critical limits chemia,

NOTE Confidence: 0.861377631538461

 $00{:}32{:}02.400 \dashrightarrow 00{:}32{:}04.108$ the most severe manifestation.

NOTE Confidence: 0.861377631538461

 $00:32:04.108 \dashrightarrow 00:32:08.109$ And what we see is that the most rapid

NOTE Confidence: 0.861377631538461

 $00:32:08.109 \longrightarrow 00:32:10.364$ increase in those admissions take

NOTE Confidence: 0.861377631538461

 $00:32:10.364 \longrightarrow 00:32:13.850$ place in populations younger than 65.

NOTE Confidence: 0.861377631538461

 $00:32:13.850 \longrightarrow 00:32:17.450$ You see the squares here representing

NOTE Confidence: 0.861377631538461

 $00:32:17.450 \longrightarrow 00:32:20.710$ men below 65, and then also rapid

NOTE Confidence: 0.861377631538461

 $00:32:20.710 \longrightarrow 00:32:23.490$ uptake in women of below 65 years,

NOTE Confidence: 0.861377631538461

 $00:32:23.490 \longrightarrow 00:32:26.690$ which is very typical of how we know it,

NOTE Confidence: 0.861377631538461

 $00:32:26.690 \longrightarrow 00:32:29.905$ because typically it is disease

NOTE Confidence: 0.861377631538461

 $00:32:29.905 \longrightarrow 00:32:32.477$ presents in older populations.

NOTE Confidence: 0.861377631538461

 $00:32:32.480 \longrightarrow 00:32:34.020$ And then with those admissions,

 $00:32:34.020 \longrightarrow 00:32:37.205$ one in five admissions is characterized with

NOTE Confidence: 0.861377631538461

 $00:32:37.205 \longrightarrow 00:32:40.450$ a comorbid anxiety and depression diagnosis,

NOTE Confidence: 0.861377631538461

 $00:32:40.450 \longrightarrow 00:32:42.480$ and these are recognized diagnosis.

NOTE Confidence: 0.861377631538461

00:32:42.480 --> 00:32:44.132 So possibly only representing

NOTE Confidence: 0.861377631538461

 $00:32:44.132 \longrightarrow 00:32:46.197$ the tip of the iceberg.

NOTE Confidence: 0.861377631538461

 $00:32:46.200 \longrightarrow 00:32:49.182$ But here we also see a steady

NOTE Confidence: 0.861377631538461

 $00:32:49.182 \longrightarrow 00:32:51.703$ increase over time in the last

NOTE Confidence: 0.861377631538461

00:32:51.703 --> 00:32:54.377 decade for both PD and and CLI.

NOTE Confidence: 0.861377631538461

 $00:32:54.380 \dashrightarrow 00:32:56.998$ Which may be related to the younger

NOTE Confidence: 0.861377631538461

 $00:32:56.998 \longrightarrow 00:32:59.599$ population that is is affected by

NOTE Confidence: 0.861377631538461

 $00:32:59.599 \dashrightarrow 00:33:01.939$ these admissions or better recognition,

NOTE Confidence: 0.861377631538461

 $00:33:01.940 \longrightarrow 00:33:04.330$ or a true greater prevalence,

NOTE Confidence: 0.861377631538461

 $00:33:04.330 \longrightarrow 00:33:07.210$ and that we don't know.

NOTE Confidence: 0.861377631538461

 $00:33:07.210 \longrightarrow 00:33:09.378$ And if we zoom in on the risk

NOTE Confidence: 0.861377631538461

 $00:33:09.378 \longrightarrow 00:33:11.010$ profile of these patients,

 $00:33:11.010 \longrightarrow 00:33:14.930$ we see that underrepresented minorities.

NOTE Confidence: 0.861377631538461

 $00{:}33{:}14.930 \dashrightarrow 00{:}33{:}17.504$ People without insurance are more likely

NOTE Confidence: 0.861377631538461

00:33:17.504 --> 00:33:20.610 to represent it in the younger group,

NOTE Confidence: 0.861377631538461

 $00:33:20.610 \longrightarrow 00:33:23.706$ and they also present with lower

NOTE Confidence: 0.861377631538461

 $00:33:23.710 \longrightarrow 00:33:28.438$ household income, more diabetes.

NOTE Confidence: 0.861377631538461

00:33:28.440 --> 00:33:30.234 Obesity prior amputation,

NOTE Confidence: 0.861377631538461

 $00:33:30.234 \longrightarrow 00:33:32.626$ addiction and mood disorders,

NOTE Confidence: 0.861377631538461

 $00:33:32.630 \longrightarrow 00:33:35.283$ and this is a profile that we

NOTE Confidence: 0.861377631538461

 $00{:}33{:}35.283 \dashrightarrow 00{:}33{:}38.089$ really don't see as much reoccurring

NOTE Confidence: 0.861377631538461

 $00:33:38.089 \longrightarrow 00:33:40.205$ in the older populations.

NOTE Confidence: 0.801321095

00:33:42.220 --> 00:33:43.976 Recognize depression in patients

NOTE Confidence: 0.801321095

 $00{:}33{:}43.976 \dashrightarrow 00{:}33{:}46.171$ with Celine during an admission

NOTE Confidence: 0.801321095

 $00{:}33{:}46.171 \dashrightarrow 00{:}33{:}48.776$ is also associated with a higher

NOTE Confidence: 0.801321095

 $00{:}33{:}48.776 \dashrightarrow 00{:}33{:}50.871$ odds of undergoing and imputation,

NOTE Confidence: 0.801321095

 $00:33:50.880 \longrightarrow 00:33:52.720$ both for endovascular procedures

NOTE Confidence: 0.801321095

 $00:33:52.720 \longrightarrow 00:33:55.480$ presented here on the left and

 $00:33:55.557 \longrightarrow 00:33:57.529$ surgical revascularization.

NOTE Confidence: 0.801321095

 $00:33:57.530 \longrightarrow 00:33:59.115$ And so whether this is

NOTE Confidence: 0.801321095

 $00:33:59.115 \longrightarrow 00:34:00.383$ constantly related or not,

NOTE Confidence: 0.801321095

 $00:34:00.390 \longrightarrow 00:34:02.658$ the fact is that people who

NOTE Confidence: 0.801321095

00:34:02.658 --> 00:34:04.709 who go through this experience

NOTE Confidence: 0.801321095

 $00:34:04.709 \longrightarrow 00:34:07.415$ are much more likely to also

NOTE Confidence: 0.801321095

 $00:34:07.415 \longrightarrow 00:34:10.220$ copresent with a major depression.

NOTE Confidence: 0.801321095

00:34:10.220 --> 00:34:10.890 Depression.

NOTE Confidence: 0.863270010833333

 $00:34:12.960 \longrightarrow 00:34:15.308$ In this same cohort,

NOTE Confidence: 0.863270010833333

00:34:15.308 --> 00:34:17.656 we demonstrated that having

NOTE Confidence: 0.863270010833333

 $00:34:17.656 \longrightarrow 00:34:19.572$ comorbid depression translated

NOTE Confidence: 0.863270010833333

 $00:34:19.572 \longrightarrow 00:34:21.800$ into a longer length of stay,

NOTE Confidence: 0.863270010833333

 $00{:}34{:}21.800 \dashrightarrow 00{:}34{:}23.408$ both for endova scular procedures

NOTE Confidence: 0.863270010833333

 $00{:}34{:}23.408 \dashrightarrow 00{:}34{:}25.418$ as well as surgical procedures,

NOTE Confidence: 0.863270010833333

 $00:34:25.420 \longrightarrow 00:34:28.360$ and it also results in higher

 $00:34:28.360 \longrightarrow 00:34:31.084$ total charges for their states are

NOTE Confidence: 0.863270010833333

 $00:34:31.084 \longrightarrow 00:34:33.876$ really it is a group that warns

NOTE Confidence: 0.863270010833333

 $00:34:33.876 \longrightarrow 00:34:37.044$ more care and has is at risk of

NOTE Confidence: 0.863270010833333

 $00:34:37.044 \longrightarrow 00:34:40.038$ more complex disease outcomes.

NOTE Confidence: 0.86890949125

 $00:34:43.120 \longrightarrow 00:34:45.712$ When we pull all the work done in PD

NOTE Confidence: 0.86890949125

00:34:45.712 --> 00:34:48.178 together on the risk factor of depression,

NOTE Confidence: 0.86890949125

 $00:34:48.180 \longrightarrow 00:34:50.178$ which we recently did with this

NOTE Confidence: 0.86890949125

 $00:34:50.178 \longrightarrow 00:34:51.960$ meta analysis in our group,

NOTE Confidence: 0.86890949125

 $00:34:51.960 \longrightarrow 00:34:54.669$ we see a definite trend emerging for

NOTE Confidence: 0.86890949125

 $00:34:54.669 \longrightarrow 00:34:56.563$ an association between depression and

NOTE Confidence: 0.86890949125

 $00:34:56.563 \longrightarrow 00:34:59.597$ mortality as we see in the top panel for

NOTE Confidence: 0.86890949125

 $00:34:59.597 \longrightarrow 00:35:01.739$ major adverse live events and amputation.

NOTE Confidence: 0.86890949125

 $00:35:01.740 \longrightarrow 00:35:03.972$ Unfortunately, there is still a possibility

NOTE Confidence: 0.86890949125

 $00:35:03.972 \longrightarrow 00:35:06.618$ of data out there to show that link,

NOTE Confidence: 0.86890949125

 $00:35:06.620 \longrightarrow 00:35:09.594$ but we do see announcing a nonsignificant

NOTE Confidence: 0.86890949125

 $00:35:09.594 \longrightarrow 00:35:11.779$ trend towards higher risk emerging.

00:35:14.640 --> 00:35:17.391 Making a switch now to the portrait

NOTE Confidence: 0.852422174666667

 $00:35:17.391 \longrightarrow 00:35:19.696$ registry work that we have done

NOTE Confidence: 0.852422174666667

 $00:35:19.696 \longrightarrow 00:35:22.139$ where we followed people with a new

NOTE Confidence: 0.852422174666667

 $00:35:22.220 \longrightarrow 00:35:25.230$ diagnosis of PTSD and who presented at

NOTE Confidence: 0.852422174666667

 $00{:}35{:}25.230 \dashrightarrow 00{:}35{:}27.927$ vascular clinics and sought out care

NOTE Confidence: 0.852422174666667

 $00:35:27.927 \longrightarrow 00:35:30.741$ at their vascular specialty clinic in

NOTE Confidence: 0.852422174666667

 $00:35:30.741 \longrightarrow 00:35:34.009$ the US and Netherlands and Australia.

NOTE Confidence: 0.852422174666667

 $00{:}35{:}34.010 \dashrightarrow 00{:}35{:}38.890$ So we see that 35% either presents with a

NOTE Confidence: 0.852422174666667

 $00{:}35{:}38.890 \dashrightarrow 00{:}35{:}41.140$ positive screen on depressive symptoms,

NOTE Confidence: 0.852422174666667

 $00:35:41.140 \longrightarrow 00:35:45.070$ anxiety, or perceived stress upon arrival.

NOTE Confidence: 0.852422174666667

 $00:35:45.070 \longrightarrow 00:35:48.031$ And a year following one in five

NOTE Confidence: 0.852422174666667

 $00:35:48.031 \longrightarrow 00:35:50.795$ unique patients still score high on

NOTE Confidence: 0.852422174666667

 $00{:}35{:}50.795 \dashrightarrow 00{:}35{:}53.145$ either one of those question naires

NOTE Confidence: 0.852422174666667

00:35:53.150 --> 00:35:55.982 for those depressive symptoms,

NOTE Confidence: 0.852422174666667

 $00:35:55.982 \longrightarrow 00:35:58.814$ anxiety and perceived stress.

 $00:35:58.820 \longrightarrow 00:36:00.242$ So people do.

NOTE Confidence: 0.852422174666667

 $00{:}36{:}00.242 \dashrightarrow 00{:}36{:}03.086$ Report these symptoms as they navigate

NOTE Confidence: 0.852422174666667

 $00:36:03.086 \longrightarrow 00:36:06.138$ their care and zooming in on the

NOTE Confidence: 0.852422174666667

 $00:36:06.138 \longrightarrow 00:36:09.200$ experience of stress for this population.

NOTE Confidence: 0.852422174666667

 $00:36:09.200 \longrightarrow 00:36:11.310$ When people report increase scores

NOTE Confidence: 0.852422174666667

00:36:11.310 --> 00:36:13.934 for perceived stress at 2 subsequent

NOTE Confidence: 0.852422174666667

 $00:36:13.934 \longrightarrow 00:36:16.550$ times as they are navigating their

NOTE Confidence: 0.852422174666667

 $00:36:16.550 \longrightarrow 00:36:20.130$ care within that study, we.

NOTE Confidence: 0.852422174666667

 $00{:}36{:}20.130 \dashrightarrow 00{:}36{:}22.230$ Linked that with their long term

NOTE Confidence: 0.852422174666667

 $00:36:22.230 \longrightarrow 00:36:24.726$ survival and what we see is that

NOTE Confidence: 0.852422174666667

 $00{:}36{:}24.726 {\:{\mbox{--}}}{>}\ 00{:}36{:}26.784$ in the four year subsequent to

NOTE Confidence: 0.852422174666667

 $00:36:26.784 \longrightarrow 00:36:27.989$ receiving care for PD,

NOTE Confidence: 0.852422174666667

 $00:36:27.990 \longrightarrow 00:36:29.418$ those who reported the

NOTE Confidence: 0.852422174666667

 $00:36:29.418 \longrightarrow 00:36:30.489$ highest trust experiences.

NOTE Confidence: 0.852422174666667

 $00:36:30.490 \longrightarrow 00:36:33.800$ They also have much higher.

NOTE Confidence: 0.852422174666667

 $00:36:33.800 \longrightarrow 00:36:37.635$ Mortality rates over the long

 $00:36:37.635 \longrightarrow 00:36:39.936$ term observation period.

NOTE Confidence: 0.852422174666667

 $00:36:39.940 \longrightarrow 00:36:43.160$ Same what we see in the disease,

NOTE Confidence: 0.852422174666667

 $00:36:43.160 \longrightarrow 00:36:46.040$ specific health status and

NOTE Confidence: 0.852422174666667

 $00:36:46.040 \longrightarrow 00:36:48.292$ trajectory of these patients.

NOTE Confidence: 0.852422174666667

 $00:36:48.292 \longrightarrow 00:36:51.134$ People in blue are the ones who

NOTE Confidence: 0.852422174666667

 $00:36:51.134 \longrightarrow 00:36:53.558$ represent those with chronic stress

NOTE Confidence: 0.852422174666667

 $00:36:53.558 \longrightarrow 00:36:55.983$ experiences and their health status

NOTE Confidence: 0.852422174666667

 $00:36:55.983 \longrightarrow 00:36:58.356$ scores are mapped out over the

NOTE Confidence: 0.852422174666667

00:36:58.356 --> 00:37:00.577 year of their treatment and what

NOTE Confidence: 0.852422174666667

 $00{:}37{:}00.577 \dashrightarrow 00{:}37{:}02.959$ we see is that the differences

NOTE Confidence: 0.852422174666667

 $00:37:02.959 \longrightarrow 00:37:04.150$ accomplished between distressed

NOTE Confidence: 0.852422174666667

 $00:37:04.211 \longrightarrow 00:37:06.136$ and non distressed populations is

NOTE Confidence: 0.852422174666667

 $00{:}37{:}06.136 \dashrightarrow 00{:}37{:}08.061$ exceeding 3 times the minimally

NOTE Confidence: 0.852422174666667

 $00:37:08.123 \longrightarrow 00:37:10.019$ clinically important difference.

NOTE Confidence: 0.852422174666667

 $00:37:10.020 \longrightarrow 00:37:12.084$ Overdose health status outcomes.

 $00:37:12.084 \longrightarrow 00:37:15.278$ So really very impactful and detrimental

NOTE Confidence: 0.852422174666667

 $00:37:15.278 \longrightarrow 00:37:18.098$ to their PD rehabilitation trajectory.

NOTE Confidence: 0.801009296153846

00:37:21.060 --> 00:37:23.196 We then further looked at two

NOTE Confidence: 0.801009296153846

 $00:37:23.196 \longrightarrow 00:37:24.620$ who was experiencing these

NOTE Confidence: 0.801009296153846

 $00:37:24.684 \longrightarrow 00:37:26.400$ chronic stress experiences,

NOTE Confidence: 0.801009296153846

 $00:37:26.400 \longrightarrow 00:37:30.434$ and we found that these chronic stress

NOTE Confidence: 0.801009296153846

 $00:37:30.434 \longrightarrow 00:37:33.219$ experiences can be reliably predicted.

NOTE Confidence: 0.801009296153846

 $00:37:33.220 \longrightarrow 00:37:36.427$ We assessed their stress at baseline 1/6

NOTE Confidence: 0.801009296153846

 $00{:}37{:}36.427 \dashrightarrow 00{:}37{:}39.550$ and 12 month follow up and we did that

NOTE Confidence: 0.801009296153846

00:37:39.637 --> 00:37:42.777 in acute myocardial infarction cohort,

NOTE Confidence: 0.801009296153846

 $00{:}37{:}42.780 \dashrightarrow 00{:}37{:}45.160$ which was our derivation cohort

NOTE Confidence: 0.801009296153846

 $00:37:45.160 \longrightarrow 00:37:47.979$ for developing this model and we

NOTE Confidence: 0.801009296153846

 $00{:}37{:}47.979 \dashrightarrow 00{:}37{:}50.133$ validated our model in the PD

NOTE Confidence: 0.801009296153846

 $00:37:50.133 \longrightarrow 00:37:52.459$ cohort that I just described.

NOTE Confidence: 0.801009296153846

 $00:37:52.460 \longrightarrow 00:37:54.450$ And again, chronic stress was

NOTE Confidence: 0.801009296153846

 $00:37:54.450 \longrightarrow 00:37:57.540$ defined as A at least two follow-up

 $00:37:57.540 \longrightarrow 00:38:00.892$ assessment periods with exceeding

NOTE Confidence: 0.801009296153846

 $00:38:00.892 \longrightarrow 00:38:05.082$ scores above the population norms.

NOTE Confidence: 0.801009296153846

00:38:05.090 --> 00:38:08.198 Factors that explain people's chronic stress,

NOTE Confidence: 0.801009296153846

 $00:38:08.200 \longrightarrow 00:38:11.084$ experiences and the predictive

NOTE Confidence: 0.801009296153846

 $00:38:11.084 \longrightarrow 00:38:14.070$ probability was 77% for the model

NOTE Confidence: 0.801009296153846

 $00:38:14.070 \longrightarrow 00:38:17.390$ that we developed and younger age

NOTE Confidence: 0.801009296153846

 $00:38:17.390 \longrightarrow 00:38:20.990$ female sex and socioeconomic factors.

NOTE Confidence: 0.801009296153846

 $00:38:20.990 \longrightarrow 00:38:22.826$ Economic hardship in particular,

NOTE Confidence: 0.801009296153846

 $00{:}38{:}22.826 \dashrightarrow 00{:}38{:}26.159$ access to care barriers and low social

NOTE Confidence: 0.801009296153846

 $00:38:26.159 \longrightarrow 00:38:29.171$ support really explained why people of

NOTE Confidence: 0.801009296153846

00:38:29.171 --> 00:38:32.188 course were experiencing this chronic stress.

NOTE Confidence: 0.801009296153846

00:38:32.190 --> 00:38:33.634 Knowing that this population

NOTE Confidence: 0.801009296153846

 $00{:}38{:}33.634 \dashrightarrow 00{:}38{:}35.800$ is so much affected by it,

NOTE Confidence: 0.801009296153846

 $00:38:35.800 \longrightarrow 00:38:39.400$ this is important treatment information

NOTE Confidence: 0.801009296153846

 $00:38:39.400 \longrightarrow 00:38:43.562$ to integrate as people get offered

 $00:38:43.562 \longrightarrow 00:38:46.767$ expensive procedures and and complicated

NOTE Confidence: 0.801009296153846

 $00:38:46.767 \longrightarrow 00:38:48.690$ disease management trajectories.

NOTE Confidence: 0.86294465952381

 $00:38:51.310 \longrightarrow 00:38:54.102$ And then lastly I want to highlight how

NOTE Confidence: 0.86294465952381

 $00:38:54.102 \longrightarrow 00:38:56.865$ depression and stress in PD populations may

NOTE Confidence: 0.86294465952381

00:38:56.865 --> 00:38:59.390 relate to their physical activity levels,

NOTE Confidence: 0.86294465952381

00:38:59.390 --> 00:39:02.696 and that's that concludes the portrait

NOTE Confidence: 0.86294465952381

 $00:39:02.700 \dashrightarrow 00:39:06.168$ data that I wanted to highlight.

NOTE Confidence: 0.86294465952381

 $00:39:06.170 \dashrightarrow 00:39:09.026$ The cornerstone of PD management at class.

NOTE Confidence: 0.86294465952381

 $00:39:09.030 \dashrightarrow 00:39:11.195$ One recommendation is that people

NOTE Confidence: 0.86294465952381

00:39:11.195 --> 00:39:14.005 get off for walking therapy and they

NOTE Confidence: 0.86294465952381

00:39:14.005 --> 00:39:15.870 are encouraged to walk three times

NOTE Confidence: 0.86294465952381

 $00:39:15.870 \longrightarrow 00:39:18.219$ a week for at least 30 minutes.

NOTE Confidence: 0.86294465952381

 $00{:}39{:}18.220 \dashrightarrow 00{:}39{:}19.836$ To stimulate their cardiovascular

NOTE Confidence: 0.86294465952381

 $00:39:19.836 \longrightarrow 00:39:21.856$ fitness and growth of collaterals.

NOTE Confidence: 0.86294465952381

 $00:39:21.860 \longrightarrow 00:39:24.828$ To improve the provision in their legs.

NOTE Confidence: 0.86294465952381

 $00:39:24.830 \longrightarrow 00:39:27.050$ In portrait, we had the depression,

 $00:39:27.050 \longrightarrow 00:39:28.290$ perceived stress,

NOTE Confidence: 0.86294465952381

 $00:39:28.290 \longrightarrow 00:39:30.150$ repeated assessments available,

NOTE Confidence: 0.86294465952381

 $00{:}39{:}30.150 \dashrightarrow 00{:}39{:}33.072$ but we also had repeated assessments

NOTE Confidence: 0.86294465952381

00:39:33.072 --> 00:39:35.868 for physical activity and we took

NOTE Confidence: 0.86294465952381

 $00{:}39{:}35.868 \dashrightarrow 00{:}39{:}38.034$ the same questions as were done

NOTE Confidence: 0.86294465952381

 $00:39:38.034 \longrightarrow 00:39:39.644$ for the inter heart study.

NOTE Confidence: 0.86294465952381

 $00:39:39.650 \longrightarrow 00:39:42.950$ The global study where we could

NOTE Confidence: 0.86294465952381

 $00:39:42.950 \longrightarrow 00:39:45.150$ rank people as sedentary,

NOTE Confidence: 0.86294465952381

 $00:39:45.150 \longrightarrow 00:39:48.234$ engaged in wild activity

NOTE Confidence: 0.86294465952381

 $00:39:48.234 \longrightarrow 00:39:50.547$ or strenuous exercise.

NOTE Confidence: 0.86294465952381

 $00:39{:}50.550 \dashrightarrow 00:39{:}53.196$ And here are the levels of depression

NOTE Confidence: 0.86294465952381

 $00:39:53.196 \longrightarrow 00:39:56.072$ and stress in those line graphs and

NOTE Confidence: 0.86294465952381

 $00{:}39{:}56.072 \dashrightarrow 00{:}39{:}58.562$ then the bar charts really present

NOTE Confidence: 0.86294465952381

 $00:39:58.645 \longrightarrow 00:40:01.093$ the sedentary behavior levels and you

NOTE Confidence: 0.86294465952381

 $00:40:01.093 \longrightarrow 00:40:04.798$ can see that this is very high upon

00:40:04.798 --> 00:40:07.383 presentation with a new diagnosis,

NOTE Confidence: 0.86294465952381

00:40:07.390 --> 00:40:11.128 44% of reports being sedentary at baseline.

NOTE Confidence: 0.86294465952381

 $00:40:11.130 \longrightarrow 00:40:12.430$ And even though those levels

NOTE Confidence: 0.86294465952381

 $00:40:12.430 \longrightarrow 00:40:13.470$ go down over time,

NOTE Confidence: 0.86294465952381

 $00:40:13.470 \longrightarrow 00:40:16.990$ they still remain pretty high.

NOTE Confidence: 0.86294465952381

00:40:16.990 --> 00:40:20.546 And when we tried to reconstruct the

NOTE Confidence: 0.86294465952381

 $00:40:20.546 \longrightarrow 00:40:23.426$ causal pathways of stress and physical

NOTE Confidence: 0.86294465952381

 $00:40:23.426 \longrightarrow 00:40:25.686$ activity in PV with generalized

NOTE Confidence: 0.86294465952381

00:40:25.686 --> 00:40:27.230 structural equation modeling,

NOTE Confidence: 0.86294465952381

 $00:40:27.230 \longrightarrow 00:40:29.822$ we see that stress at the

NOTE Confidence: 0.86294465952381

 $00{:}40{:}29.822 \dashrightarrow 00{:}40{:}32.450$ top here and lowered physical

NOTE Confidence: 0.86294465952381

00:40:32.450 --> 00:40:35.149 activity reinforce each other,

NOTE Confidence: 0.86294465952381

 $00:40:35.149 \longrightarrow 00:40:38.947$ and we see bidirectional relations emerge,

NOTE Confidence: 0.86294465952381

 $00{:}40{:}38.950 \dashrightarrow 00{:}40{:}41.248$ meaning that a decrease in physical

NOTE Confidence: 0.86294465952381

00:40:41.248 --> 00:40:43.323 activity results in higher stress

NOTE Confidence: 0.86294465952381

00:40:43.323 --> 00:40:45.219 experiences and higher stress

 $00:40:45.219 \longrightarrow 00:40:47.115$ experiences result in decreased.

NOTE Confidence: 0.86294465952381

00:40:47.120 --> 00:40:49.740 Physical activity which is a

NOTE Confidence: 0.86294465952381

 $00:40:49.740 \longrightarrow 00:40:52.360$ problem for the management of

NOTE Confidence: 0.86294465952381

 $00:40:52.457 \longrightarrow 00:40:55.167$ of these patients and disease.

NOTE Confidence: 0.86294465952381

 $00:40:55.170 \longrightarrow 00:40:56.109$ For the pression,

NOTE Confidence: 0.86294465952381

00:40:56.109 --> 00:40:57.987 we see a slightly different picture,

NOTE Confidence: 0.86294465952381

 $00:40:57.990 \longrightarrow 00:41:01.110$ and as you can see the

NOTE Confidence: 0.86294465952381

 $00{:}41{:}01.110 \dashrightarrow 00{:}41{:}03.190$ following strong trends emerged.

NOTE Confidence: 0.86294465952381

 $00:41:03.190 \longrightarrow 00:41:07.691$ Patients who lower their level of physical

NOTE Confidence: 0.86294465952381

 $00:41:07.691 \longrightarrow 00:41:11.258$ activity at baseline or then result.

NOTE Confidence: 0.86294465952381

00:41:11.260 --> 00:41:13.644 Subsequently they present with

NOTE Confidence: 0.86294465952381

 $00:41:13.644 \longrightarrow 00:41:16.471$ higher levels of depression and

NOTE Confidence: 0.86294465952381

 $00{:}41{:}16.471 \dashrightarrow 00{:}41{:}18.676$ these effects are reinforced further

NOTE Confidence: 0.86294465952381

 $00:41:18.676 \longrightarrow 00:41:21.749$ downstream of the PD rehab trajectory.

NOTE Confidence: 0.86294465952381

 $00:41:21.750 \longrightarrow 00:41:22.704$ Underscoring that.

00:41:22.704 --> 00:41:23.181 Again,

NOTE Confidence: 0.86294465952381

00:41:23.181 --> 00:41:26.520 the role of physical activity and the

NOTE Confidence: 0.86294465952381

00:41:26.605 --> 00:41:31.180 risk of depression go hand in hand and.

NOTE Confidence: 0.86294465952381

 $00:41:31.180 \longrightarrow 00:41:34.030$ Need to be seen together as

NOTE Confidence: 0.86294465952381

 $00:41:34.030 \longrightarrow 00:41:36.850$ as one manages this disease.

NOTE Confidence: 0.86294465952381

 $00:41:36.850 \longrightarrow 00:41:39.986$ So the key takeaways from this line

NOTE Confidence: 0.86294465952381

00:41:39.986 --> 00:41:42.214 of research are, not surprisingly,

NOTE Confidence: 0.86294465952381

00:41:42.214 --> 00:41:44.424 that depression and perceived stress

NOTE Confidence: 0.86294465952381

00:41:44.424 --> 00:41:47.366 are very common in PD that PD and

NOTE Confidence: 0.86294465952381

 $00:41:47.366 \longrightarrow 00:41:50.250$ overall is on the rise with increasingly

NOTE Confidence: 0.86294465952381

 $00{:}41{:}50.332 \dashrightarrow 00{:}41{:}53.142$ complex patient profiles and people

NOTE Confidence: 0.86294465952381

 $00:41:53.142 \longrightarrow 00:41:55.952$ presenting with more severe disease

NOTE Confidence: 0.86294465952381

 $00:41:56.040 \longrightarrow 00:41:59.365$ and a rapid growth in younger populations.

NOTE Confidence: 0.86294465952381

00:41:59.370 --> 00:42:00.002 Number two,

NOTE Confidence: 0.86294465952381

 $00:42:00.002 \longrightarrow 00:42:03.128$ what I like to highlight is that it is

NOTE Confidence: 0.86294465952381

 $00:42:03.128 \longrightarrow 00:42:05.228$ associated with increased mortality,

00:42:05.230 --> 00:42:06.950 poor PD, health status,

NOTE Confidence: 0.86294465952381

00:42:06.950 --> 00:42:07.810 recovery trajectories,

NOTE Confidence: 0.86294465952381

 $00:42:07.810 \longrightarrow 00:42:11.506$ higher cost and longer admissions and #3.

NOTE Confidence: 0.86294465952381

 $00:42:11.510 \longrightarrow 00:42:13.589$ We do know who is at risk

NOTE Confidence: 0.86294465952381

 $00:42:13.589 \longrightarrow 00:42:15.450$ of high stress experiences,

NOTE Confidence: 0.86294465952381

 $00:42:15.450 \longrightarrow 00:42:18.936$ and we also know that it is.

NOTE Confidence: 0.86294465952381

00:42:18.940 --> 00:42:21.325 Very much intertwined with people's

NOTE Confidence: 0.86294465952381

00:42:21.325 --> 00:42:23.233 levels of physical activity,

NOTE Confidence: 0.86294465952381

 $00:42:23.240 \longrightarrow 00:42:26.656$ which is part of of the cornerstone

NOTE Confidence: 0.86294465952381

00:42:26.656 --> 00:42:28.120 of PD management,

NOTE Confidence: 0.86294465952381

 $00:42:28.120 \longrightarrow 00:42:31.032$ behavioral activation and and.

NOTE Confidence: 0.86294465952381

 $00:42:31.032 \longrightarrow 00:42:34.672$ Physical activity to achieve successful

NOTE Confidence: 0.86294465952381

 $00{:}42{:}34.672 \dashrightarrow 00{:}42{:}38.692$ outcomes and stress and depression

NOTE Confidence: 0.86294465952381

 $00:42:38.692 \longrightarrow 00:42:42.484$ may exacerbate the cycle of of

NOTE Confidence: 0.86294465952381

 $00:42:42.484 \longrightarrow 00:42:45.368$ sedentary behavior in this population.

00:42:47.740 --> 00:42:51.500 So in the final part of my presentation,

NOTE Confidence: 0.93673392125

 $00{:}42{:}51.500 \dashrightarrow 00{:}42{:}54.156$ I would like to make the case for

NOTE Confidence: 0.93673392125

 $00:42:54.156 \longrightarrow 00:42:56.410$ how integrated care options for

NOTE Confidence: 0.93673392125

 $00:42:56.410 \longrightarrow 00:42:57.925$ cardiovascular populations and

NOTE Confidence: 0.93673392125

 $00:42:57.925 \longrightarrow 00:43:00.698$ specialty care are needed to come

NOTE Confidence: 0.93673392125

 $00:43:00.698 \longrightarrow 00:43:03.064$ to a more value based care delivery.

NOTE Confidence: 0.93673392125

00:43:03.070 --> 00:43:06.269 So, as I highlighted throughout my talk,

NOTE Confidence: 0.93673392125

 $00:43:06.270 \longrightarrow 00:43:08.438$ atherosclerotic disease is a

NOTE Confidence: 0.93673392125

 $00:43:08.438 \longrightarrow 00:43:10.606$ generalized process and manifestations

NOTE Confidence: 0.93673392125

 $00:43:10.606 \longrightarrow 00:43:12.888$ can occur in the coronary,

NOTE Confidence: 0.93673392125

 $00:43:12.890 \longrightarrow 00:43:15.480$ carotid and lower extremity arteries.

NOTE Confidence: 0.93673392125

 $00:43:15.480 \longrightarrow 00:43:18.196$ And even though the interest in the

NOTE Confidence: 0.93673392125

 $00{:}43{:}18.196 \dashrightarrow 00{:}43{:}20.688$ field started in coronary disease

NOTE Confidence: 0.93673392125

 $00:43:20.688 \longrightarrow 00:43:23.180$ because those manifestations were

NOTE Confidence: 0.93673392125

00:43:23.180 --> 00:43:25.736 probably also more dramatic and and,

NOTE Confidence: 0.93673392125

 $00:43:25.740 \longrightarrow 00:43:28.990$ and that's where everything started.

 $00:43:28.990 \longrightarrow 00:43:31.816$ I feel like we're just at the beginning of

NOTE Confidence: 0.93673392125

 $00{:}43{:}31.816 \dashrightarrow 00{:}43{:}33.871$ documenting and understanding the impacts

NOTE Confidence: 0.93673392125

 $00:43:33.871 \longrightarrow 00:43:36.385$ of other manifestations on people's lives.

NOTE Confidence: 0.93673392125

 $00:43:36.390 \longrightarrow 00:43:38.138$ I haven't even covered

NOTE Confidence: 0.93673392125

 $00:43:38.138 \longrightarrow 00:43:39.449$ carotid artery stenosis,

NOTE Confidence: 0.93673392125

 $00:43:39.450 \longrightarrow 00:43:44.084$ which is another unique set of symptoms

NOTE Confidence: 0.93673392125

 $00:43:44.084 \longrightarrow 00:43:48.173$ and care interactions that need to

NOTE Confidence: 0.93673392125

 $00{:}43{:}48.173 \dashrightarrow 00{:}43{:}51.493$ be considered for those populations.

NOTE Confidence: 0.93673392125

 $00:43:51.500 \longrightarrow 00:43:54.620$ So really it makes sense to.

NOTE Confidence: 0.93673392125

 $00:43:54.620 \longrightarrow 00:43:56.512$ Start broadening the subspecialty

NOTE Confidence: 0.93673392125

00:43:56.512 --> 00:43:58.877 of cardiac psychology and and

NOTE Confidence: 0.93673392125

 $00{:}43{:}58.877 \dashrightarrow 00{:}44{:}01.508$ to include vascular populations.

NOTE Confidence: 0.93673392125

 $00{:}44{:}01.510 \dashrightarrow 00{:}44{:}04.905$ Because it's really a spectrum of disease.

NOTE Confidence: 0.93673392125

 $00{:}44{:}04.910 \dashrightarrow 00{:}44{:}08.046$ And recently we came together with a

NOTE Confidence: 0.93673392125

 $00:44:08.046 \longrightarrow 00:44:10.988$ few colleagues here at Yale colleagues,

 $00:44:10.990 \longrightarrow 00:44:15.830$ psychologist and cardiologist were we.

NOTE Confidence: 0.93673392125

 $00{:}44{:}15.830 \dashrightarrow 00{:}44{:}19.232$ Reflected on the role of what cardiovascular

NOTE Confidence: 0.93673392125

 $00:44:19.232 \longrightarrow 00:44:22.044$ psychology or health psychology could

NOTE Confidence: 0.93673392125

 $00:44:22.044 \longrightarrow 00:44:24.588$ contribute to cardiovascular care.

NOTE Confidence: 0.93673392125

 $00:44:24.590 \longrightarrow 00:44:26.210$ There is a, of course,

NOTE Confidence: 0.93673392125

 $00:44:26.210 \longrightarrow 00:44:28.146$ a role for intervention,

NOTE Confidence: 0.93673392125 00:44:28.146 --> 00:44:28.630 design, NOTE Confidence: 0.93673392125

 $00:44:28.630 \longrightarrow 00:44:30.109$ delivery and testing,

NOTE Confidence: 0.93673392125

 $00:44:30.109 \longrightarrow 00:44:33.067$ and there's a role to address

NOTE Confidence: 0.93673392125

00:44:33.067 --> 00:44:34.732 psychosocial behavioral factors

NOTE Confidence: 0.93673392125

 $00{:}44{:}34.732 \dashrightarrow 00{:}44{:}37.467$ to promote lifestyle changes that

NOTE Confidence: 0.93673392125

00:44:37.467 --> 00:44:40.002 we often recommend these patients

NOTE Confidence: 0.93673392125

 $00:44:40.002 \longrightarrow 00:44:42.858$ to make and the support that they

NOTE Confidence: 0.93673392125

 $00{:}44{:}42.858 \dashrightarrow 00{:}44{:}45.810$ need to help make these changes.

NOTE Confidence: 0.93673392125

 $00:44:45.810 \longrightarrow 00:44:48.904$ And the impact on their health outcomes.

NOTE Confidence: 0.93673392125

 $00{:}44{:}48.910 \dashrightarrow 00{:}44{:}50.450$ Health psychology can contribute

 $00:44:50.450 \longrightarrow 00:44:52.760$ to the assessment and the design

NOTE Confidence: 0.93673392125

 $00:44:52.820 \longrightarrow 00:44:54.955$ and the analysis and interpretation

NOTE Confidence: 0.93673392125

 $00{:}44{:}54.955 \dashrightarrow 00{:}44{:}56.663$ of psychosocial risk factors,

NOTE Confidence: 0.93673392125

 $00:44:56.670 \longrightarrow 00:44:58.930$ both at the patient level,

NOTE Confidence: 0.93673392125

 $00:44:58.930 \longrightarrow 00:45:01.849$ but also measures at the programmatic level.

NOTE Confidence: 0.93673392125

 $00:45:01.850 \longrightarrow 00:45:04.181$ As a lot of of the fields in in

NOTE Confidence: 0.93673392125

 $00:45:04.181 \longrightarrow 00:45:06.835$ in medical specialties and in

NOTE Confidence: 0.93673392125

 $00:45:06.835 \longrightarrow 00:45:09.151$ behavioral healthcare are moving

NOTE Confidence: 0.93673392125

 $00:45:09.151 \longrightarrow 00:45:11.229$ into measurement based care.

NOTE Confidence: 0.93673392125

 $00:45:11.230 \longrightarrow 00:45:14.558$ Where we let patients.

NOTE Confidence: 0.881971152727273

00:45:17.140 --> 00:45:20.276 Say what quality of care means and and

NOTE Confidence: 0.881971152727273

 $00:45:20.276 \longrightarrow 00:45:23.764$ and how that is reflected in the scores

NOTE Confidence: 0.881971152727273

 $00{:}45{:}23.764 \dashrightarrow 00{:}45{:}26.790$ on on these domains of assessment.

NOTE Confidence: 0.881971152727273

 $00:45:26.790 \longrightarrow 00:45:29.180$ Treating comorbid mental mental health

NOTE Confidence: 0.881971152727273

 $00:45:29.180 \longrightarrow 00:45:32.181$ disorders in the context of medical

 $00:45:32.181 \longrightarrow 00:45:35.397$ illness and facilitate patient care team

NOTE Confidence: 0.881971152727273

 $00:45:35.397 \longrightarrow 00:45:37.950$ relationships and provide insight and.

NOTE Confidence: 0.881971152727273

 $00:45:37.950 \longrightarrow 00:45:41.010$ Expertise and the role of psychology

NOTE Confidence: 0.881971152727273

 $00:45:41.010 \longrightarrow 00:45:43.726$ for physiological interactions that take

NOTE Confidence: 0.881971152727273

 $00:45:43.726 \longrightarrow 00:45:46.110$ place within cardiovascular diseases.

NOTE Confidence: 0.881971152727273

00:45:46.110 --> 00:45:48.792 And understanding how it affects the

NOTE Confidence: 0.881971152727273

 $00:45:48.792 \longrightarrow 00:45:51.398$ patients experience and in the last

NOTE Confidence: 0.881971152727273

 $00:45:51.398 \longrightarrow 00:45:53.981$ decade a lot of the treatments for

NOTE Confidence: 0.881971152727273

 $00{:}45{:}53.981 \dashrightarrow 00{:}45{:}55.991$ coronary and cardiovascular disease

NOTE Confidence: 0.881971152727273

00:45:55.991 --> 00:45:58.596 in general has gotten increasingly

NOTE Confidence: 0.881971152727273

 $00{:}45{:}58.596 \dashrightarrow 00{:}46{:}01.736$ more technical and with a lot of

NOTE Confidence: 0.881971152727273

 $00:46:01.736 \longrightarrow 00:46:03.480$ technological innovations taking place.

NOTE Confidence: 0.881971152727273

 $00:46:03.480 \longrightarrow 00:46:06.231$ So it's also important to consider what

NOTE Confidence: 0.881971152727273

 $00:46:06.231 \longrightarrow 00:46:08.229$ treatment options are available and

NOTE Confidence: 0.881971152727273

 $00:46:08.229 \longrightarrow 00:46:10.473$ how that impacts the disease process

NOTE Confidence: 0.881971152727273

 $00:46:10.473 \longrightarrow 00:46:13.157$ and the role of psychosocial factors.

 $00{:}46{:}13.160 \dashrightarrow 00{:}46{:}16.130$ And so there too is a role for cardiac.

NOTE Confidence: 0.881971152727273

00:46:16.130 --> 00:46:17.860 Would carry a vascular sychology.

NOTE Confidence: 0.823918453333333

 $00{:}46{:}20.230 \dashrightarrow 00{:}46{:}22.575$ So for integrated PED care it is

NOTE Confidence: 0.823918453333333

 $00:46:22.575 \longrightarrow 00:46:25.173$ not only what are the patient wants

NOTE Confidence: 0.823918453333333

 $00:46:25.173 \longrightarrow 00:46:27.447$ stents or or what are surgical

NOTE Confidence: 0.823918453333333

 $00:46:27.522 \longrightarrow 00:46:29.706$ bypass is the right way to go,

NOTE Confidence: 0.823918453333333

 $00:46:29.710 \longrightarrow 00:46:31.314$ or supervised exercise is

NOTE Confidence: 0.823918453333333

 $00{:}46{:}31.314 \dashrightarrow 00{:}46{:}33.319$ something that people might want

NOTE Confidence: 0.823918453333333

 $00:46:33.319 \longrightarrow 00:46:35.944$ to try and the medications to

NOTE Confidence: 0.823918453333333

 $00{:}46{:}35.944 \dashrightarrow 00{:}46{:}37.668$ lower their cardiovascular risk.

NOTE Confidence: 0.823918453333333

 $00:46:37.670 \longrightarrow 00:46:41.198$ But it is also do people have the

NOTE Confidence: 0.823918453333333

 $00:46:41.198 \longrightarrow 00:46:44.771$ support and the capacity to navigate all

NOTE Confidence: 0.823918453333333

 $00{:}46{:}44.771 \dashrightarrow 00{:}46{:}47.422$ of these disease experiences and the

NOTE Confidence: 0.823918453333333

 $00:46:47.422 \longrightarrow 00:46:49.437$ interaction with their treatment and.

NOTE Confidence: 0.823918453333333

 $00:46:49.440 \longrightarrow 00:46:51.920$ Is their care being addressed

 $00:46:51.920 \longrightarrow 00:46:54.400$ from a whole person perspective

NOTE Confidence: 0.823918453333333

 $00:46:54.483 \longrightarrow 00:46:57.393$ and or psychosocial factors also

NOTE Confidence: 0.823918453333333

 $00:46:57.393 \longrightarrow 00:47:00.544$ considered for the disease management?

NOTE Confidence: 0.823918453333333

 $00:47:00.544 \longrightarrow 00:47:03.749$ So increasingly our teams become

NOTE Confidence: 0.823918453333333

 $00:47:03.749 \longrightarrow 00:47:05.930$ multidisciplinary and models of

NOTE Confidence: 0.823918453333333

00:47:05.930 --> 00:47:08.355 Co treatment and cross training

NOTE Confidence: 0.823918453333333

 $00:47:08.355 \longrightarrow 00:47:10.720$ actually make sense if we want

NOTE Confidence: 0.823918453333333

 $00:47:10.720 \longrightarrow 00:47:13.214$ to meet the patient's needs.

NOTE Confidence: 0.823918453333333

00:47:13.214 --> 00:47:16.265 And as specialties move in and out

NOTE Confidence: 0.823918453333333

 $00:47:16.265 \longrightarrow 00:47:18.180$ the circle depending on on the

NOTE Confidence: 0.823918453333333

 $00{:}47{:}18.180 \dashrightarrow 00{:}47{:}19.998$ different needs and we feel that.

NOTE Confidence: 0.823918453333333

 $00:47:20.000 \longrightarrow 00:47:22.460$ There is definitely a place also

NOTE Confidence: 0.823918453333333

 $00:47:22.460 \longrightarrow 00:47:24.604$ for health psychology to help

NOTE Confidence: 0.823918453333333

 $00:47:24.604 \longrightarrow 00:47:26.889$ support the specialty care of

NOTE Confidence: 0.823918453333333

 $00:47:26.889 \longrightarrow 00:47:29.058$ these populations as they manage

NOTE Confidence: 0.823918453333333

 $00:47:29.058 \longrightarrow 00:47:30.306$ their cardiovascular condition.

 $00:47:33.600 \longrightarrow 00:47:36.400$ Many of of the goals for managing a

NOTE Confidence: 0.848824837894737

 $00{:}47{:}36.400 \dashrightarrow 00{:}47{:}39.336$ depression or managing stress and managing

NOTE Confidence: 0.848824837894737

00:47:39.336 --> 00:47:42.036 peripheral artery disease as discussed,

NOTE Confidence: 0.848824837894737

 $00:47:42.040 \longrightarrow 00:47:44.970$ overlap, and so increasingly an

NOTE Confidence: 0.848824837894737

 $00:47:44.970 \longrightarrow 00:47:47.314$ inter disciplinary team based approach

NOTE Confidence: 0.848824837894737

 $00:47:47.314 \longrightarrow 00:47:50.479$ makes sense to to realize more

NOTE Confidence: 0.848824837894737

 $00:47:50.479 \longrightarrow 00:47:52.979$ successful outcomes in this population.

NOTE Confidence: 0.856718283125

 $00:47:55.520 \longrightarrow 00:47:58.508$ Collaborative work and care has been

NOTE Confidence: 0.856718283125

 $00:47:58.508 \longrightarrow 00:48:01.768$ shown to be effective for medical

NOTE Confidence: 0.856718283125

 $00:48:01.768 \longrightarrow 00:48:04.116$ populations such as diabetes.

NOTE Confidence: 0.856718283125

 $00:48:04.120 \longrightarrow 00:48:06.165$ Oftentimes, these models were offered

NOTE Confidence: 0.856718283125

00:48:06.165 --> 00:48:08.780 offered in the primary care setting,

NOTE Confidence: 0.856718283125

 $00{:}48{:}08.780 \longrightarrow 00{:}48{:}11.868$ and so there is a model for success

NOTE Confidence: 0.856718283125

 $00:48:11.868 \longrightarrow 00:48:14.319$ that has been demonstrated.

NOTE Confidence: 0.856718283125

 $00:48:14.320 \longrightarrow 00:48:16.820$ But with the increasingly complex

00:48:16.820 --> 00:48:19.320 populations and the intensity of

NOTE Confidence: 0.856718283125

 $00{:}48{:}19.400 \longrightarrow 00{:}48{:}22.676$ care that people undergo and complex

NOTE Confidence: 0.856718283125

 $00{:}48{:}22.676 \dashrightarrow 00{:}48{:}24.860$ interactions with their treatments.

NOTE Confidence: 0.856718283125

00:48:24.860 --> 00:48:27.476 There's a case to make to offer behavioral

NOTE Confidence: 0.856718283125

00:48:27.476 --> 00:48:29.959 health care within the specialty setting,

NOTE Confidence: 0.856718283125

 $00:48:29.960 \longrightarrow 00:48:32.949$ as it also is perhaps desired from

NOTE Confidence: 0.856718283125

 $00:48:32.949 \longrightarrow 00:48:35.616$ the patient's perspective and from a

NOTE Confidence: 0.856718283125

 $00:48:35.616 \longrightarrow 00:48:37.796$ referral and care linkage perspective.

NOTE Confidence: 0.856718283125

 $00:48:37.800 \longrightarrow 00:48:39.990$ Being part of the same treatment

NOTE Confidence: 0.856718283125

 $00:48:39.990 \longrightarrow 00:48:42.490$ team is is something to strive for.

NOTE Confidence: 0.834342462857143

 $00{:}48{:}46.150 \dashrightarrow 00{:}48{:}49.349$ We're finding ourselves at a new juncture.

NOTE Confidence: 0.834342462857143

 $00:48:49.350 \longrightarrow 00:48:51.890$ Is is what I feel.

NOTE Confidence: 0.834342462857143

 $00{:}48{:}51.890 \dashrightarrow 00{:}48{:}55.040$ We described the post war chronic

NOTE Confidence: 0.834342462857143

 $00:48:55.040 \longrightarrow 00:48:57.221$ disease burden, but we're still

NOTE Confidence: 0.834342462857143

 $00:48:57.221 \longrightarrow 00:48:59.106$ dealing with that disease burden.

NOTE Confidence: 0.834342462857143

 $00:48:59.110 \longrightarrow 00:49:02.122$ And as you look at the

 $00:49:02.122 \longrightarrow 00:49:04.130$ global burden of disease,

NOTE Confidence: 0.834342462857143

00:49:04.130 --> 00:49:07.580 ischemic heart disease tops this list

NOTE Confidence: 0.834342462857143

 $00:49:07.580 \longrightarrow 00:49:11.476$ in both populations 50 + 75 years

NOTE Confidence: 0.834342462857143

00:49:11.476 --> 00:49:14.476 and plus or populations age rapidly.

NOTE Confidence: 0.834342462857143

00:49:14.480 --> 00:49:17.266 And the demands on our health services

NOTE Confidence: 0.834342462857143

 $00{:}49{:}17.266 \dashrightarrow 00{:}49{:}19.297$ and healthcare systems continue to

NOTE Confidence: 0.834342462857143

00:49:19.297 --> 00:49:21.985 increase and so this is something really.

NOTE Confidence: 0.834342462857143

 $00{:}49{:}21.990 \dashrightarrow 00{:}49{:}24.998$ Policy makers and health care

NOTE Confidence: 0.834342462857143

 $00:49:24.998 \longrightarrow 00:49:28.006$ administrators need to integrate

NOTE Confidence: 0.834342462857143

 $00:49:28.006 \longrightarrow 00:49:31.664$ in their policy and and the way we

NOTE Confidence: 0.834342462857143

00:49:31.664 --> 00:49:33.895 deliver and design care for patients

NOTE Confidence: 0.834342462857143

 $00{:}49{:}33.895 \dashrightarrow 00{:}49{:}36.767$ and how that care is value based and

NOTE Confidence: 0.834342462857143

 $00{:}49{:}36.843 \dashrightarrow 00{:}49{:}39.627$ and it is a good return on investment.

NOTE Confidence: 0.834342462857143

 $00:49:39.630 \longrightarrow 00:49:42.302$ So there's still an enormous wave of of

NOTE Confidence: 0.834342462857143

00:49:42.302 --> 00:49:44.620 new challenges for the sustainability of

00:49:44.620 --> 00:49:46.996 our healthcare systems that is coming.

NOTE Confidence: 0.834342462857143 00:49:47.000 --> 00:49:49.570 Towards us. NOTE Confidence: 0.834342462857143

 $00:49:49.570 \longrightarrow 00:49:51.930$ So we found ourselves at a such a

NOTE Confidence: 0.834342462857143

00:49:51.930 --> 00:49:53.958 junction before as I explained in

NOTE Confidence: 0.834342462857143

00:49:53.958 --> 00:49:55.668 the beginning of my presentation,

NOTE Confidence: 0.834342462857143

 $00:49:55.670 \longrightarrow 00:49:58.076$ but today's reality adds a little

NOTE Confidence: 0.834342462857143

00:49:58.076 --> 00:50:00.290 bit more complexities into the mix,

NOTE Confidence: 0.834342462857143

 $00:50:00.290 \longrightarrow 00:50:03.500$ so I gains in prevention for

NOTE Confidence: 0.834342462857143

 $00:50:03.500 \longrightarrow 00:50:04.570$ cardiovascular disease.

NOTE Confidence: 0.834342462857143

00:50:04.570 --> 00:50:06.586 Seem to need to be reinvigorated.

NOTE Confidence: 0.834342462857143

 $00{:}50{:}06.590 {\:{\mbox{--}}\!\!>}\ 00{:}50{:}09.080$ Given that younger populations present

NOTE Confidence: 0.834342462857143

 $00{:}50{:}09.080 \dashrightarrow 00{:}50{:}11.570$ earlier with much more aggressive

NOTE Confidence: 0.834342462857143

 $00:50:11.645 \longrightarrow 00:50:13.930$ disease due to lifestyle factors.

NOTE Confidence: 0.834342462857143

 $00:50:13.930 \longrightarrow 00:50:16.526$ Cost are really unsustainable.

NOTE Confidence: 0.834342462857143

 $00:50:16.526 \longrightarrow 00:50:19.122$ There's highly technological care

NOTE Confidence: 0.834342462857143

 $00:50:19.122 \longrightarrow 00:50:21.679$ being incentivized over basic high

00:50:21.679 --> 00:50:24.416 value care and the people who have

NOTE Confidence: 0.834342462857143

 $00:50:24.499 \longrightarrow 00:50:27.004$ access to that highly technological

NOTE Confidence: 0.834342462857143

 $00:50:27.004 \longrightarrow 00:50:29.509$ care versus those who don't.

NOTE Confidence: 0.834342462857143

 $00:50:29.510 \longrightarrow 00:50:33.010$ Those disparities continue to increase,

NOTE Confidence: 0.834342462857143

 $00:50:33.010 \longrightarrow 00:50:35.630$ and there's an enormous burden

NOTE Confidence: 0.834342462857143

 $00:50:35.630 \longrightarrow 00:50:38.038$ towards vulnerable populations who

NOTE Confidence: 0.834342462857143

 $00:50:38.038 \longrightarrow 00:50:40.446$ even have difficulties accessing

NOTE Confidence: 0.834342462857143

 $00:50:40.446 \longrightarrow 00:50:43.126$ care and are being diagnosed early.

NOTE Confidence: 0.834342462857143

 $00:50:43.126 \longrightarrow 00:50:46.380$ And so it does show up late in the

NOTE Confidence: 0.834342462857143

 $00:50:46.380 \longrightarrow 00:50:49.218$ disease process with more complex disease,

NOTE Confidence: 0.834342462857143

 $00:50:49.220 \longrightarrow 00:50:52.670$ and we see decreasing life expectancy

NOTE Confidence: 0.834342462857143

 $00:50:52.670 \longrightarrow 00:50:55.739$ in younger generations because of that.

NOTE Confidence: 0.834342462857143

00:50:55.740 --> 00:50:58.337 And and then we face the post

NOTE Confidence: 0.834342462857143

 $00{:}50{:}58.340 \dashrightarrow 00{:}51{:}01.260$ pandemic and and global challenges,

NOTE Confidence: 0.834342462857143

 $00:51:01.260 \longrightarrow 00:51:04.158$ which really has increased the mental

 $00:51:04.158 \longrightarrow 00:51:06.749$ health burden overall and strain

NOTE Confidence: 0.834342462857143

 $00{:}51{:}06.749 \dashrightarrow 00{:}51{:}09.077$ communities that are suffering.

NOTE Confidence: 0.834342462857143

 $00:51:09.080 \longrightarrow 00:51:12.476$ So health psychology can yet again

NOTE Confidence: 0.834342462857143

 $00:51:12.480 \longrightarrow 00:51:14.634$ provide an answer to these complexities

NOTE Confidence: 0.834342462857143

 $00:51:14.634 \longrightarrow 00:51:17.272$ and how to deal with this reality

NOTE Confidence: 0.834342462857143

00:51:17.272 --> 00:51:19.534 and contribute to more value based

NOTE Confidence: 0.834342462857143

 $00:51:19.540 \longrightarrow 00:51:23.476$ care models that can address medical

NOTE Confidence: 0.834342462857143

 $00:51:23.476 \longrightarrow 00:51:26.656$ populations from a whole person.

NOTE Confidence: 0.834342462857143

 $00{:}51{:}26.660 \dashrightarrow 00{:}51{:}29.756$ Perspective and offer our expertise in

NOTE Confidence: 0.834342462857143

 $00:51:29.756 \longrightarrow 00:51:33.010$ in the chronic disease trajectories.

NOTE Confidence: 0.965525914

 $00:51:35.760 \longrightarrow 00:51:40.028$ I would like to thank all of the

NOTE Confidence: 0.965525914

00:51:40.028 --> 00:51:41.692 faculty collaborators here at

NOTE Confidence: 0.965525914

00:51:41.692 --> 00:51:44.260 Yale and outside and and globally.

NOTE Confidence: 0.965525914

 $00:51:44.260 \longrightarrow 00:51:46.255$ Also, who have contributed to

NOTE Confidence: 0.965525914

 $00:51:46.255 \longrightarrow 00:51:49.031$ this work and the people in our

NOTE Confidence: 0.965525914

00:51:49.031 --> 00:51:51.137 research team and here at Yale,

 $00:51:51.140 \longrightarrow 00:51:54.045$ but also at the America Heart Institute.

NOTE Confidence: 0.965525914

 $00{:}51{:}54.050 \dashrightarrow 00{:}51{:}58.388$ In Kansas City and the team in in Tillburg,

NOTE Confidence: 0.965525914

 $00:51:58.390 \longrightarrow 00:52:00.574$ and of course all the patients

NOTE Confidence: 0.965525914

 $00:52:00.574 \longrightarrow 00:52:02.554$ that have contributed to this

NOTE Confidence: 0.965525914

 $00:52:02.554 \longrightarrow 00:52:05.648$ data of of this body of work.

NOTE Confidence: 0.965525914

 $00:52:05.650 \longrightarrow 00:52:07.575$ And I want to thank you for

NOTE Confidence: 0.965525914

00:52:07.575 --> 00:52:09.721 listening to my talk and having me

NOTE Confidence: 0.965525914

00:52:09.721 --> 00:52:12.030 in this grand Round series and also

NOTE Confidence: 0.965525914

 $00:52:12.030 \longrightarrow 00:52:14.178$ would like to encourage people to

NOTE Confidence: 0.965525914

 $00:52:14.178 \longrightarrow 00:52:16.502$ join our upcoming health Ecology

NOTE Confidence: 0.965525914

 $00{:}52{:}16.502 \dashrightarrow 00{:}52{:}19.607$ Virtual Forum happening May 20.

NOTE Confidence: 0.965525914

 $00:52:19.610 \longrightarrow 00:52:21.578$ Where the growth and contributions of

NOTE Confidence: 0.965525914

 $00:52:21.578 \dashrightarrow 00:52:23.890$ health psychology will be further discussed,

NOTE Confidence: 0.965525914

 $00:52:23.890 \longrightarrow 00:52:26.226$ and I'd be glad to take any questions

NOTE Confidence: 0.965525914

 $00:52:26.226 \longrightarrow 00:52:27.998$ and thank you for listening.