Dr Héctor Bueno presents the ESC consensus document on mental health and CVD

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ESC calls for a cultural shift to deal with the adverse combination of mental health conditions and cardiovascular disease

Professor Héctor Bueno, a researcher at the National Centre for Cardiovascular Research (CNIC) and the Cardiology Department of the 12 de Octubre University Hospital, and Professor Christi Deaton, from the University of Cambridge (United Kingdom), have presented a Clinical Consensus Document from the European Society of Cardiology (ESC) calling for greater awareness of the multidirectional relationship between mental health disorders and cardiovascular disease in order to improve patient health.

The Consensus Statement recommends that mental health symptoms are systematically screened for during cardiovascular care, and cardiovascular risk is routinely assessed for those being treated for mental health conditions. While poor mental health can be a contributory factor to cardiovascular disease, people living with cardiovascular disease are also at greater risk of poor mental health. Patients experiencing both cardiovascular disease and a mental health condition have worse health outcomes.

The new Consensus Statement also recommends that mental health and psychosocial risk factors become part of cardiovascular risk assessments for healthy individuals.
Significant changes to clinical cardiovascular care are advised by the Consensus Statement. This includes the establishment of Psycho-Cardio Teams, multidisciplinary teams to treat patients that include mental health professionals, such as psychologists or psychiatrists, working alongside cardiovascular care professionals. These teams should be integrated into standard care and tailored to local need.
The Consensus Statement proposes a cultural shift to treat the deadly combination of mental health conditions and cardiovascular disease.

This will involve improvements in patient care, such as professionals acknowledging the complex relationship between mental health and cardiovascular disease, working together to integrate both areas of care, therefore advocating for change to implement a better integrated person-centred care that is tailored to individual circumstances. This would present a significant change as most current models of cardiovascular care do not currently consider mental health to be a main goal.

“Clinical cardiovascular practice often overlooks the impact of mental health and the importance of its inclusion in care. We need to see cardiovascular health professionals developing collaborations with mental health professionals in Psycho-Cardio Teams to help identify early mental health conditions in our patients and improve care and support for patients and their caregivers,” said Professor Héctor Bueno.

“We are advising that mental health is actively considered in clinical appointments and that screening for mental health conditions becomes part of the assessment of patients at regular intervals. We are also advocating psychological support for caregivers,” Professor Bueno concluded. el Dr. Bueno.

Key points:

- Lack of awareness by healthcare professionals of the prevalence of mental health conditions in the population, and the impact of this on the increased risk of developing cardiovascular disease.
- Limited appreciation among healthcare professionals of the incidence and prevalence of mental health conditions in people with cardiovascular disease and the impact of this on quality of life, therapeutic adherence, and health outcomes.

The Consensus Statement also outlines substantial gaps in knowledge about the interplay between

mental health, cardiovascular health and disease. This includes a lack of evidence-based protocols to:

- Support mental health in the general population to reduce the risk of cardiovascular disease
- Screen people with mental health conditions for cardiovascular disease
- Treat mental health conditions in people with cardiovascular disease

People with severe mental illness are at increased risk of developing supraventricular and ventricular arrhythmias, which may eventually lead to sudden cardiac death. Increased arrhythmia risk is caused by multiple factors, including distress resulting from their mental health condition, high prevalence of risk factors, unhealthy lifestyle and potentially some medications.

“We hope the Consensus Statement will spark a change that empowers patients to feel able to discuss their mental health with cardiovascular professionals, and that they will have a better chance of this being taken seriously. This means accessing timely assessment, management, and the support they need to improve their mental health,” concluded Professor Deaton.

The ‘2025 ESC Clinical Consensus Statement on Mental Health and Cardiovascular Disease’ was developed by the task force on mental health and cardiovascular disease of the European Society of Cardiology (ESC). The Statement has been endorsed by the European Federation of Psychologists' Associations, the European Psychiatric Association, and the International Society of Behavioral Medicine.

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