

Ethnicity, SMI and Health

Dr Lade Smith CBE FRCPsych

Consultant Psychiatrist and Visiting Senior Lecturer

Clinical Director National Collaborating Centre for Mental Health

Joint Presidential Lead for Race and Equality RCPsych

Presidential Candidate RCPsych 2023

drladesmith.com

@DrLadeSmith

Source of Medical Risk in Major Mental Disorders

- Related to disease
 - Symptoms
 - Inherent vulnerability to diabetes/CVS disease?
- Health behaviours
 - Substance use
 - HIV and Hepatitis C
 - Smoking
 - Inactivity
 - Poor nutrition/diet
- Related to treatment
 - antipsychotic effects
 - Weight gain
 - Diabetes
 - Hyperlipidaemia
 - Hyperprolactinemia
 - CVD
- Related to system of
 - Fragmentation
 - Poor access (misattribution, stigma)

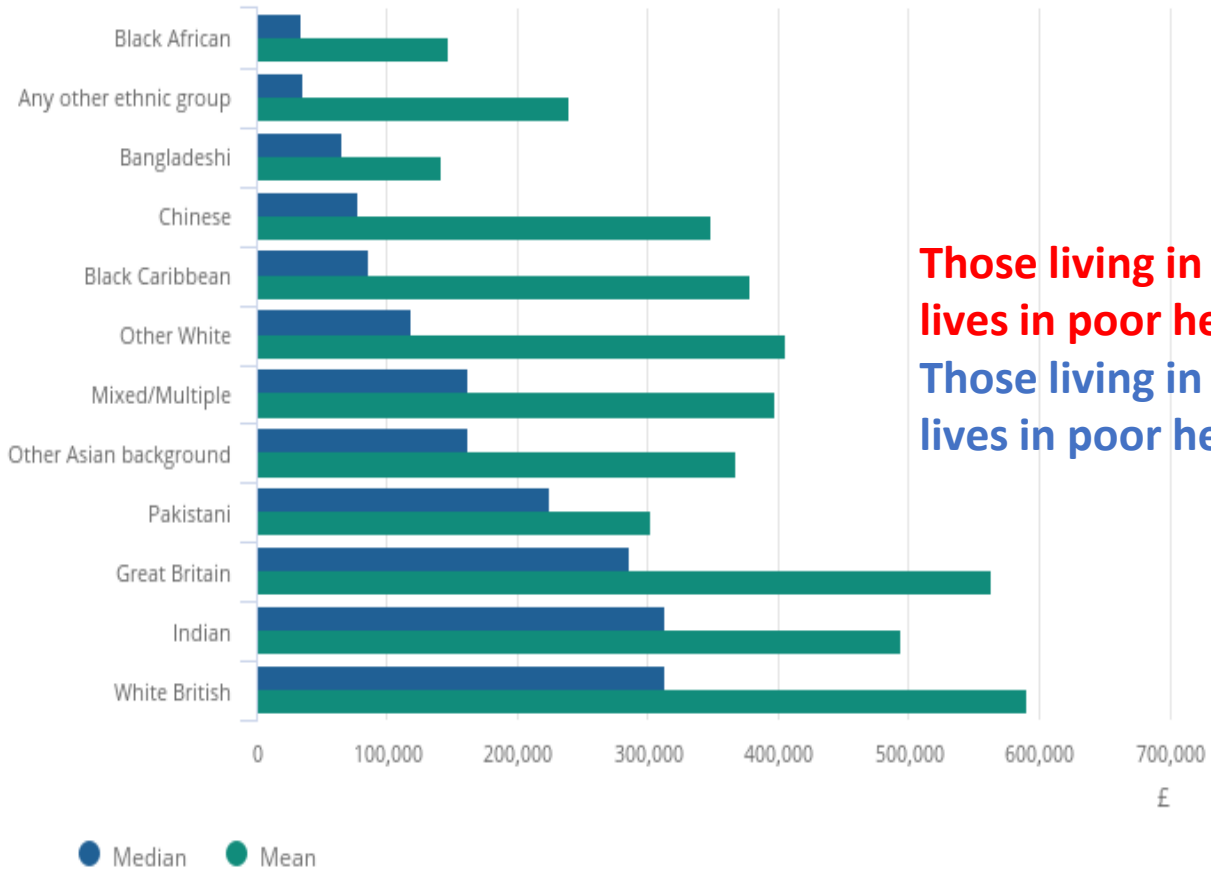
Other non-modifiable factors – e.g **age, ethnicity**

Ethnicity and Health (Kings Fund 2021)

- Significant health inequalities between ethnic minority and white groups, and between different ethnic minority groups (and across different conditions).
- Access to primary care health services is generally equitable but less so across other health services
- Compared with the white population, disability-free life expectancy is estimated to be lower among several ethnic minority groups.
- Cancer incidence - highest in the white population, **rates of infant mortality, cardiovascular disease (CVD) and diabetes are higher among Black and South Asian groups.**
- Covid-19 pandemic - disproportionate impact on ethnic minority communities, who have experienced higher infection and mortality rates than the white population.
- ***People from the Gypsy or Irish Traveller, Bangladeshi and Pakistani communities have the poorest health outcomes across a range of indicators.***

Figure 3: Median total household wealth is highest for those with a White British head of the household

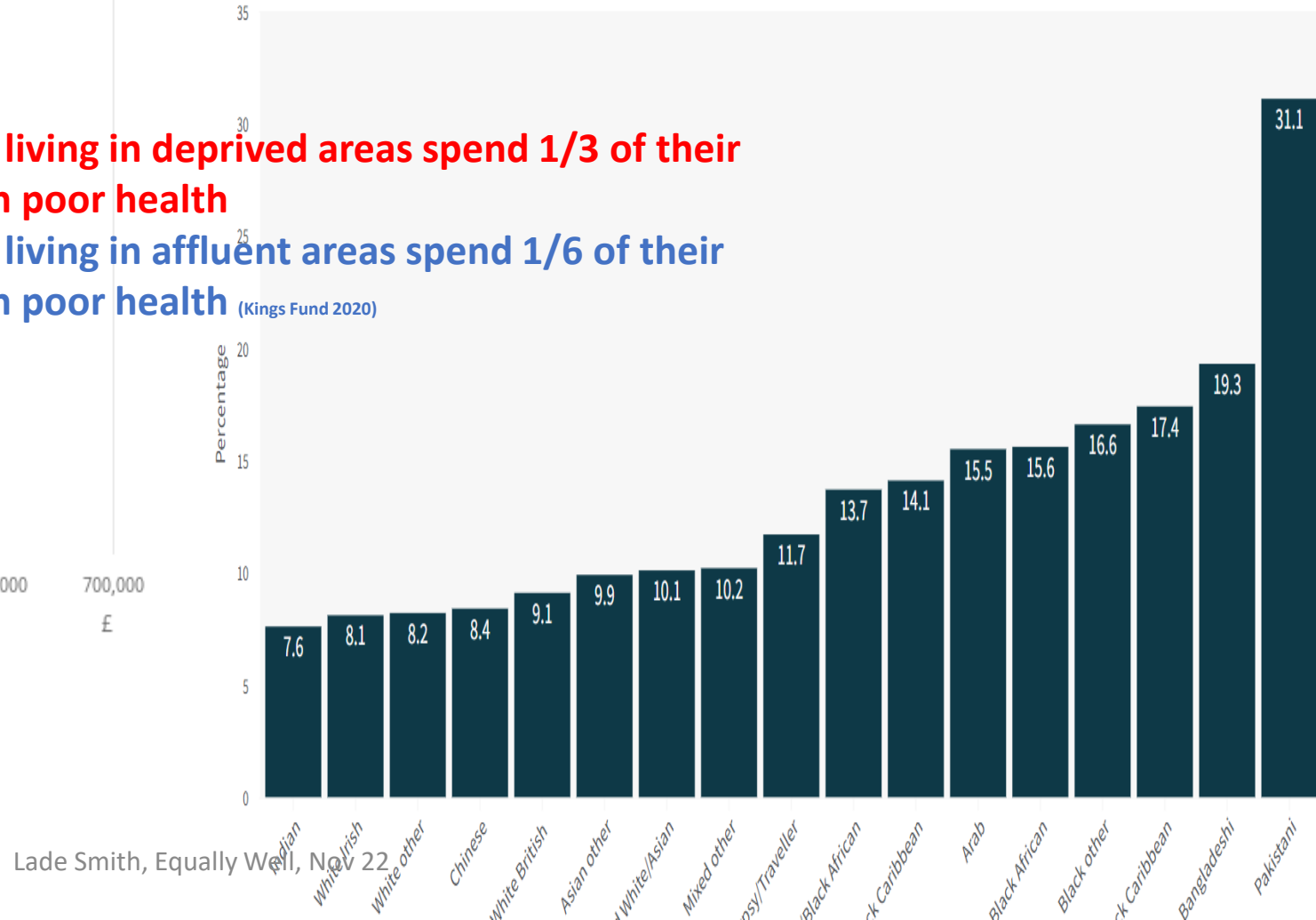
Average total household wealth (£) by ethnicity of the household head; Great Britain, April 2016 to March 2018



Those living in deprived areas spend 1/3 of their lives in poor health
Those living in affluent areas spend 1/6 of their lives in poor health (Kings Fund 2020)

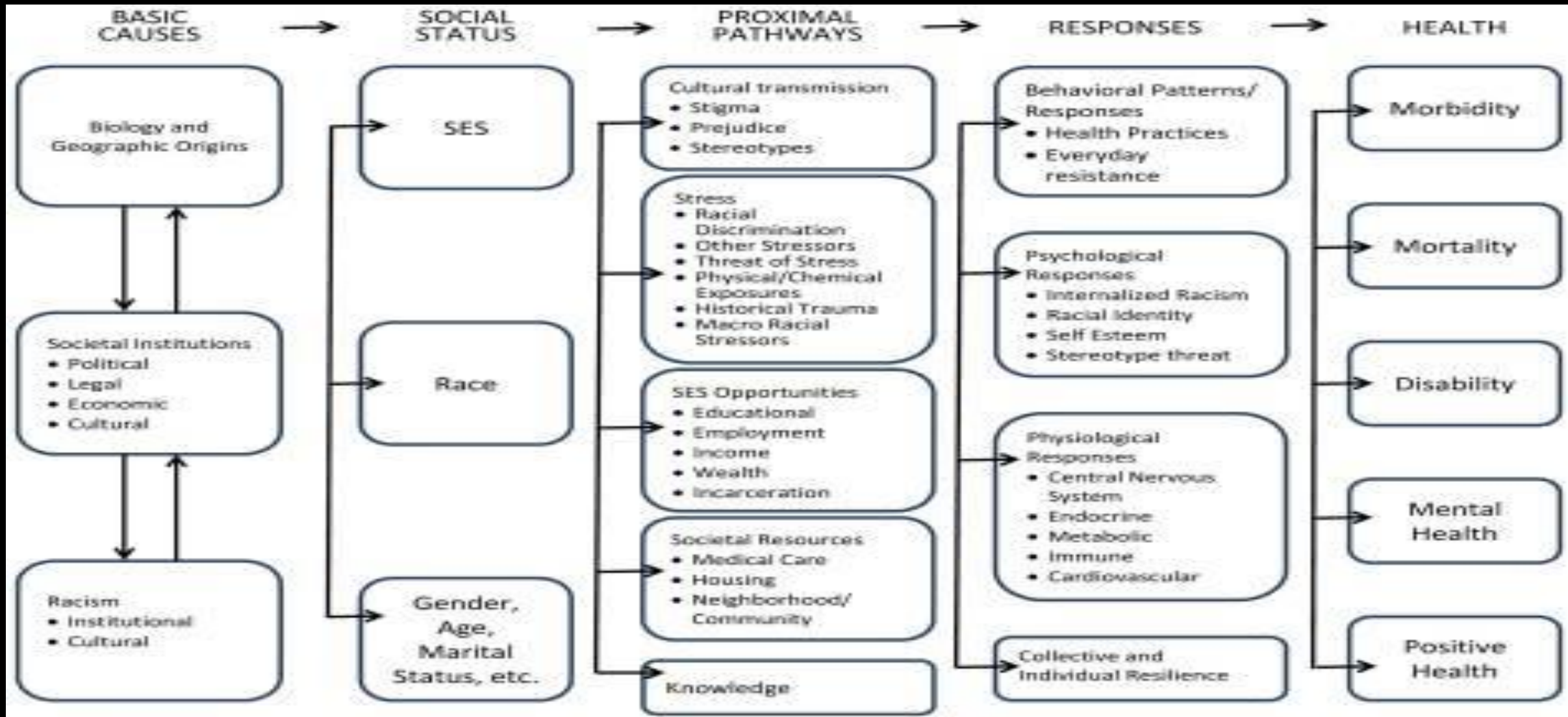
Kings Fund (Raleigh & Holmes 2021)

Figure 7 Per cent of ethnic group populations living in the ten per cent of most deprived neighbourhoods, England, 2019



Source: Office for National Statistics - Wealth and Assets Survey

Williams and Mohammed (Am Beh Sci, 2013)



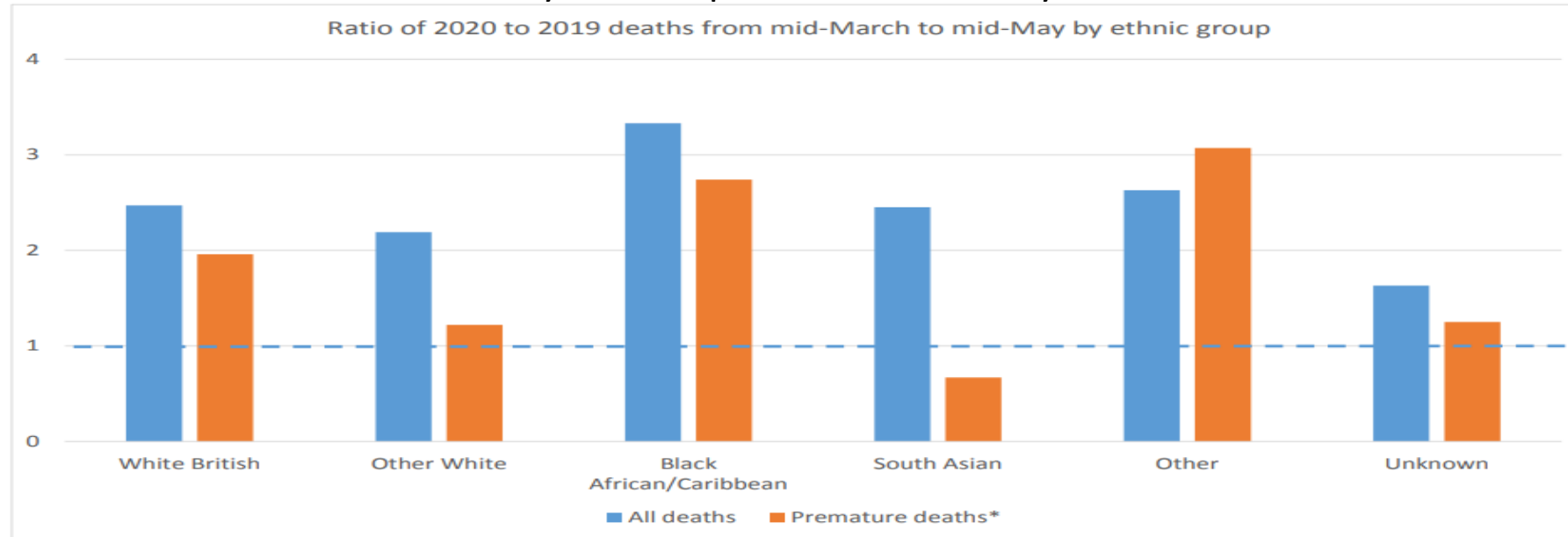
People with SMI at High Risk for Physical Ill-health

- Females with SMI have greater cardiovascular risk than males
- Ethnicity* – black African origin, South Asian
- FH of diabetes and CVS disease
- Drug-naïve patients
- High potency antipsychotics
- High dose antipsychotics
- Polypharmacy
- Substance use, especially cocaine/crack/stimulants

Excess mortality related to covid pandemic for those with SMI

(Stewart et al, MedRxiv)

Black African/Caribbean:- all mortality 3.3 xs, premature mortality (<70y.o.), 2.47 xs
White British:- all mortality 2.47 xs, premature mortality 1.96 xs



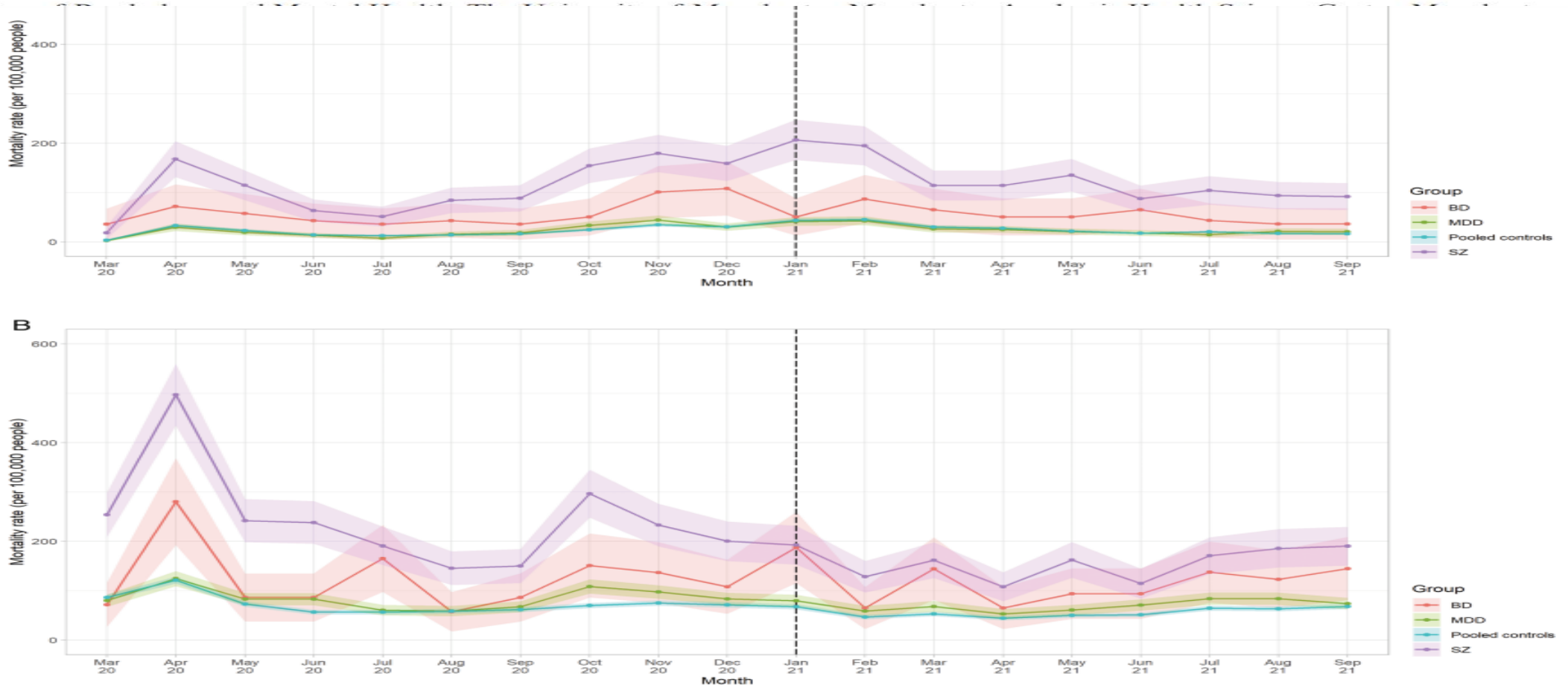
*Age at death <70 years

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- Evidence of **worse disease severity and worse outcomes in those with SMI** compared with general population...
- Cfed similar 2 month time period in 2019, 2.4 fold excess mortality in SLaM patients with SMI
- **Those with SMI are now in Priority Group 6 (of 10) for vaccination**

Heightened COVID-19 Mortality in People With Severe Mental Illness Persists After Vaccination: A Cohort Study of Greater Manchester Residents

Lamiece Hassan^{*,1,○}, Chelsea Sawyer¹, Niels Peek^{2,3,9,○}, Karina Lovell⁴, Andre F. Carvalho⁵, Marco Solmi^{6-8,○}, George Tilston^{2,9}, Matthew Sperrin², and Joseph Firth^{1,10}



Covid-19

- Obesity, hyperlipidaemia and impaired glucose control associated with poorer outcomes with Covid-19
- Delayed presentation, misattribution of symptoms and stigmatising attitudes of health professionals
- Isolation policies – ?negative impact on MH
- Increased risk in ethnic minority patients
- **Thus far** (with caveats...it's early days):-
 - Little evidence of increase risk of contracting Covid in people with SMI (above and beyond usual risk factors)

Barber et al 2020, Centre for EBM

Stewart et al 2020, medRxiv

Ethnicity, SMI and Health

- Minoritised ethnic groups are disproportionately affected by socio-economic deprivation, a key determinant of health status.
- **Driven by a wider social context in which structural discrimination can reinforce inequalities among ethnic groups**, for example in housing, employment and the criminal justice system, which in turn can have a negative impact on health.
- Evidence shows that **racism and discrimination** can also have a negative impact on the physical and mental health of people from ethnic minority groups.
- People with SMI are at greater risk of physical ill-health – this year Covid, Flu pose significant and direct risks.
- Encourage vaccination take-up, PPE use in appropriate environments
- Measures to combat obesity - Diet, exercise, medication choice

Thank you!

ANY QUESTIONS!!

@LadeSmith

shubulade.smith@kcl.ac.uk

www.drladesmith.com