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Objective, But Not Subjective, Measures of Early Life Adversity Are Associated with Elevated Serum Levels of High-sensitivity C-reactive Protein in Middle-aged Men

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Introduction: Early life adversities have been suggested to associate with immune dysregulation in later life. Nevertheless, most earlier studies have relied on retrospective self-reports of early adversity.

Objectives: To investigate the association between serum high-sensitivity C-reactive protein (hsCRP) levels and objective and subjective measures of early adverse experiences in a population-based sample of 770 men aged 42–61 years.

Aims: To test whether objectively recorded early adversities associate with increased systemic inflammation more strongly than retrospectively self-reported early adversities.

Methods: Objective data on early adverse experiences were collected from primary and secondary school records. Subjective data were retrospectively inquired with a questionnaire at adulthood. The adverse experiences comprised family alcohol problems, parental divorce, and death of a family member. Having ≥ 1 adverse experiences was coded as having experienced early adversity. Serum hsCRP was measured with the Immulite High Sensitivity CRP Assay concurrently with the questionnaire data collection. Individuals with $hsCRP > 10$ were excluded. The conducted logistic regression analyses were adjusted for age, marital status, education, smoking pack-years, alcohol use, maximal oxygen uptake, body mass index, cardiovascular disease, diabetes, regular pain medication, and depressive symptoms.

Results: Objectively recorded early adversities ($n=185$) associated with hsCRP levels ≥ 3 (OR 1.73, 95% CI 1.02-2.95, $p=0.04$; reference hsCRP <1). No such association was detected with regard to subjectively reported early adversities ($n=139$; OR 1.63, 95% CI 0.92-2.92, $p=0.10$; reference hsCRP <1).

Conclusions: Objective measures of early adversity may more closely link with elevated systemic inflammation than self-reported retrospective measures of early adversity.