



Early-life stress (ELS) & psycho-cardiometabolic comorbidity



29/03/2023

Serena Defina, Erasmus MC



This project has received funding from the European Union's Horizon 2020 research and innovation programme under Grant Agreement N° 848158.

Background



Pregnancy



Childhood

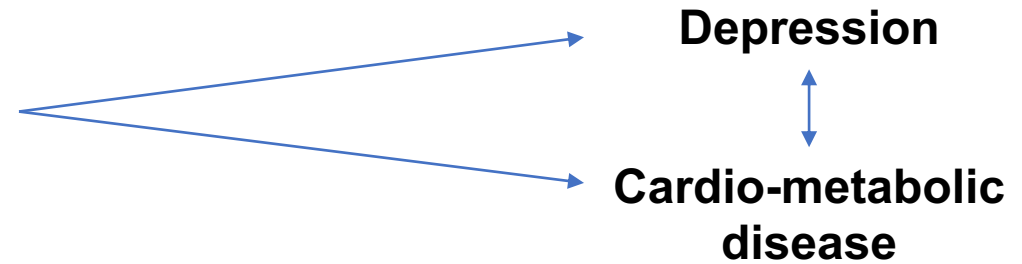


Adolescence



Adulthood

Early-life stress (ELS)



Background



Pregnancy



Childhood



Adolescence



Adulthood

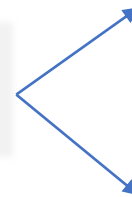
Early-life stress (ELS)

Internalizing
symptoms

Excess
adiposity

Depression

Cardio-metabolic
disease



This talk

1

Differential effects of prenatal and postnatal ELS on internalizing symptoms, adiposity and their comorbidity in early adolescence

2

The role of exercise, sleep and diet in the association between ELS and psycho-cardiometabolic health

3

Cross-sectional and longitudinal relations between internalizing symptoms and cardiometabolic health from childhood to early adulthood



1

Differential effects of prenatal and postnatal ELS on internalizing symptoms, adiposity and their comorbidity in early adolescence

Serena Defina, Tom Woofenden, Vilte Baltramonaityte, Carmine M. Pariante, Karim Lekadir, Vincent W. V. Jaddoe, Fadila Serdarevic, Henning Tiemeier, Esther Walton, Janine F. Felix, and Charlotte A.M. Cecil

Background



Pregnancy



Childhood



Adolescence

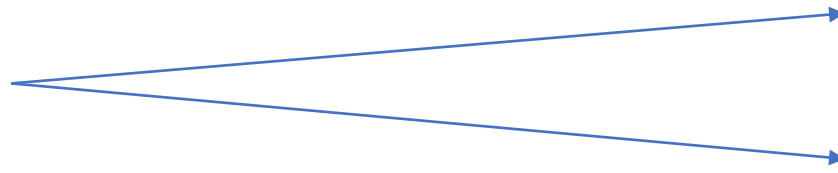


Adulthood

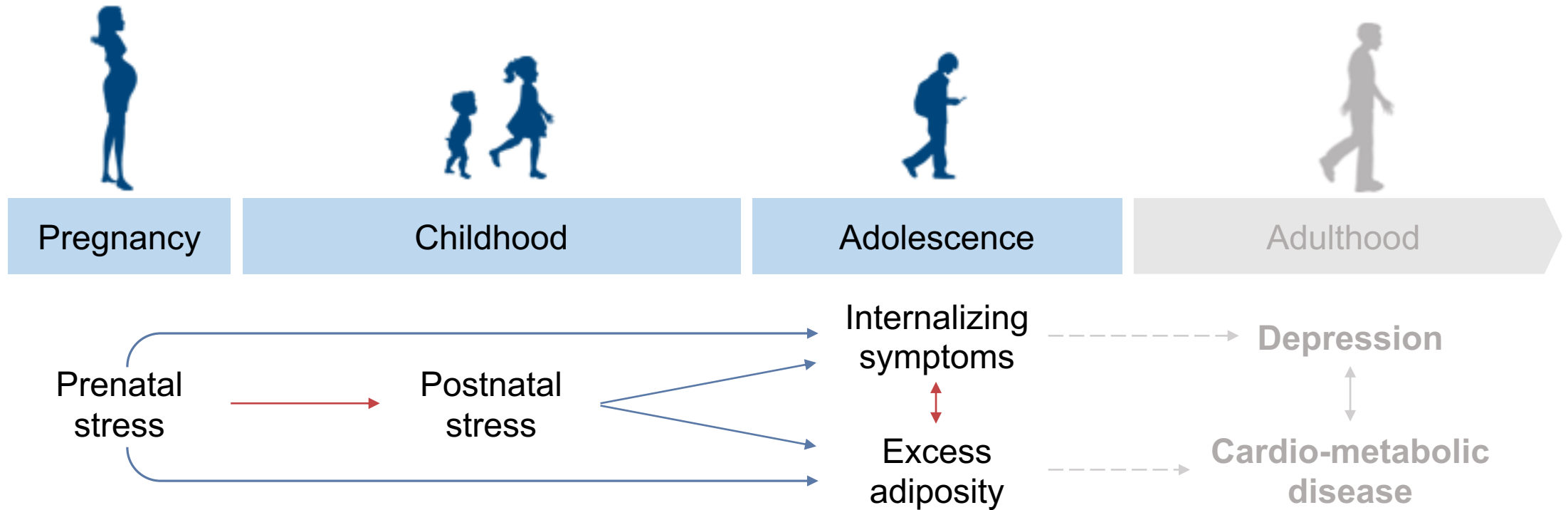
**Early-life
stress
(ELS)**

Depression

**Cardio-metabolic
disease**



Background

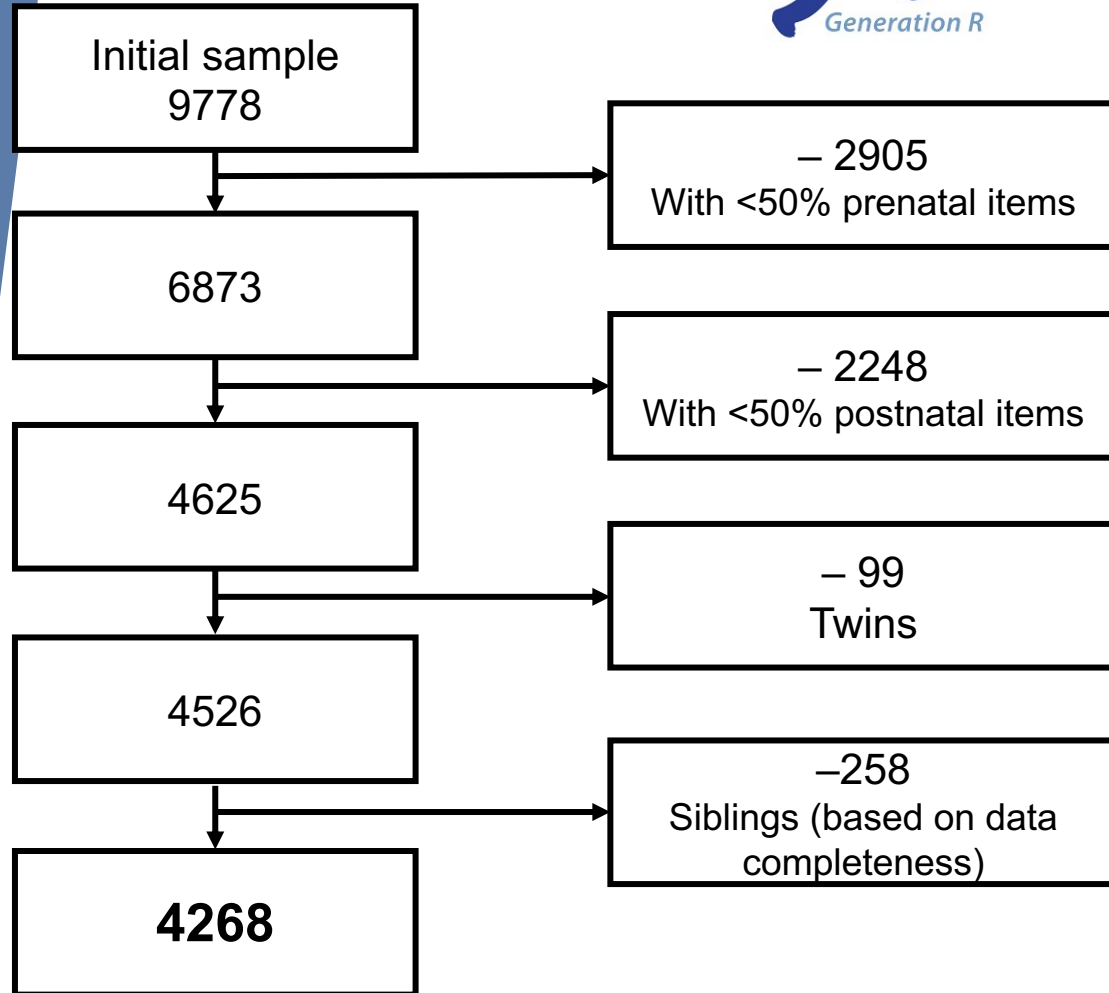


Aims

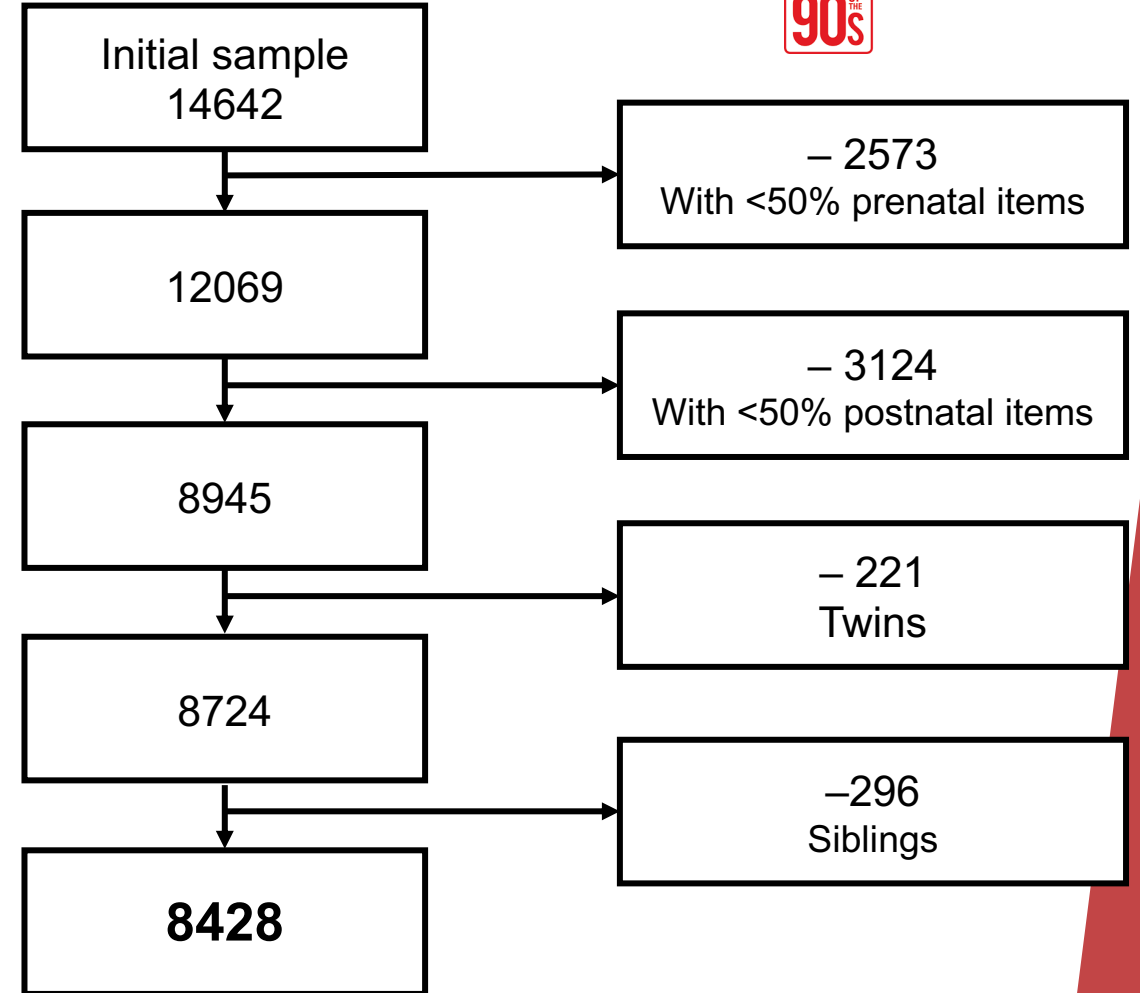
- I. What is the contribution of prenatal vs. postnatal stress?
- II. Is ELS a risk factor for comorbidity?

Sample

Generation R



ALSPAC



Measures: **ELS exposure**

Pregnancy

PRENATAL STRESS

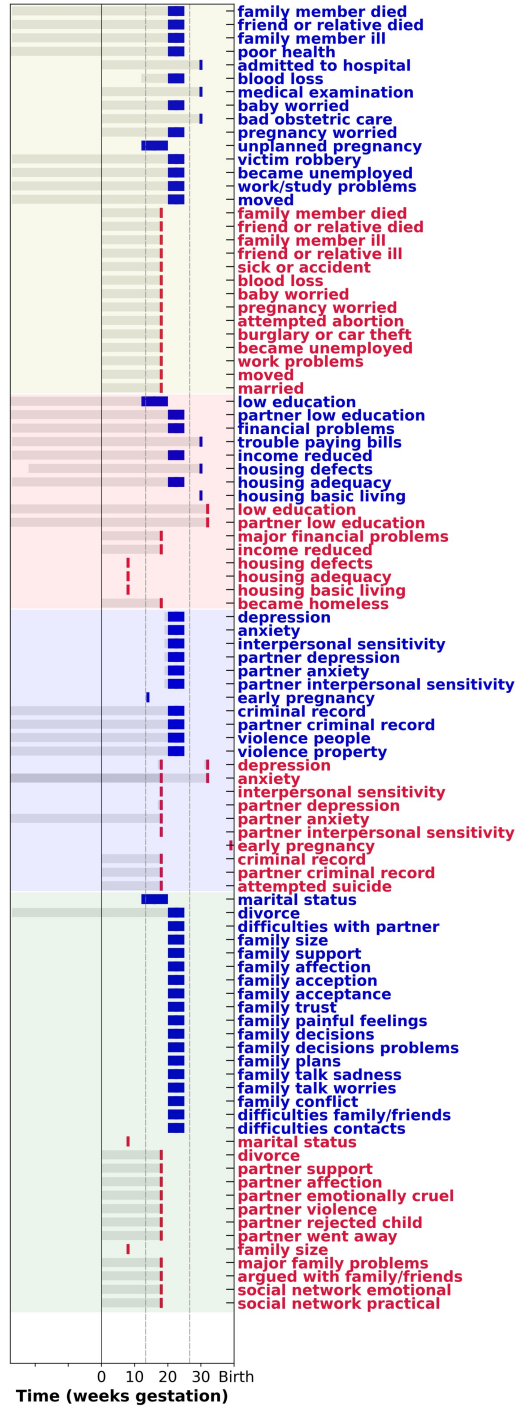
- Life events
e.g., victim of robbery
- Contextual risk
e.g., financial difficulties
- Parental risk
e.g., psychopathology
- Interpersonal risk
e.g., family conflicts

Childhood (0 – 10 years)

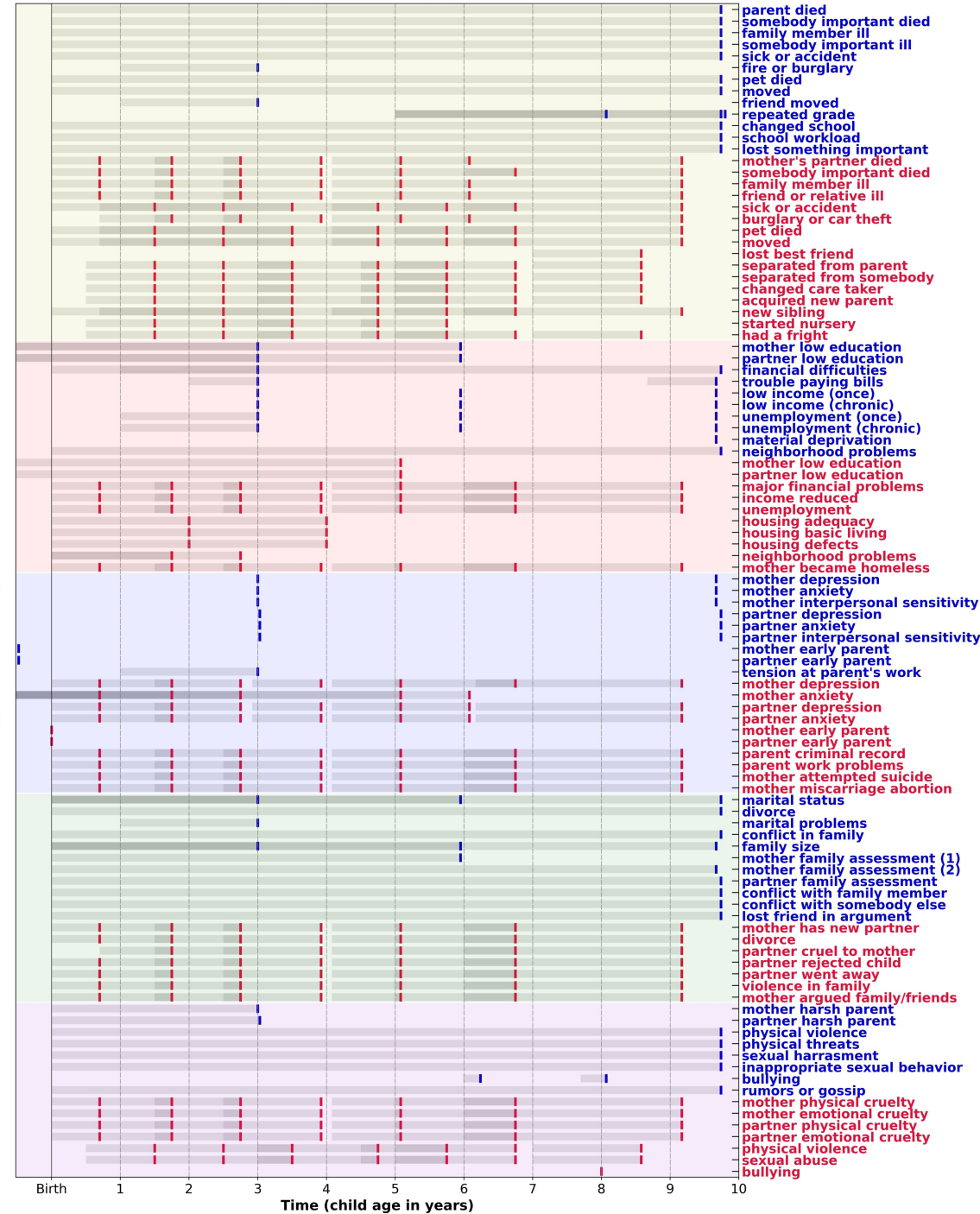
POSTNATAL STRESS

- Life events
e.g., death of a relative
- Contextual risk
e.g., low parental education
- Parental risk
e.g., parental psychopathology
- Interpersonal risk
e.g., divorce, overcrowding
- Direct victimization
e.g., bullying, harsh parenting

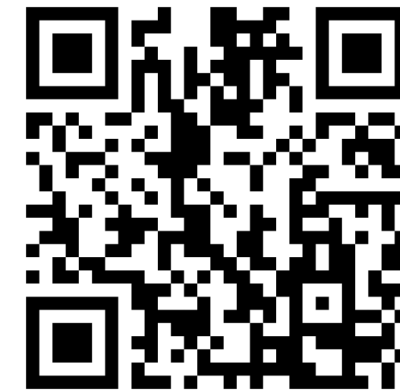
Prenatal stress



Postnatal stress

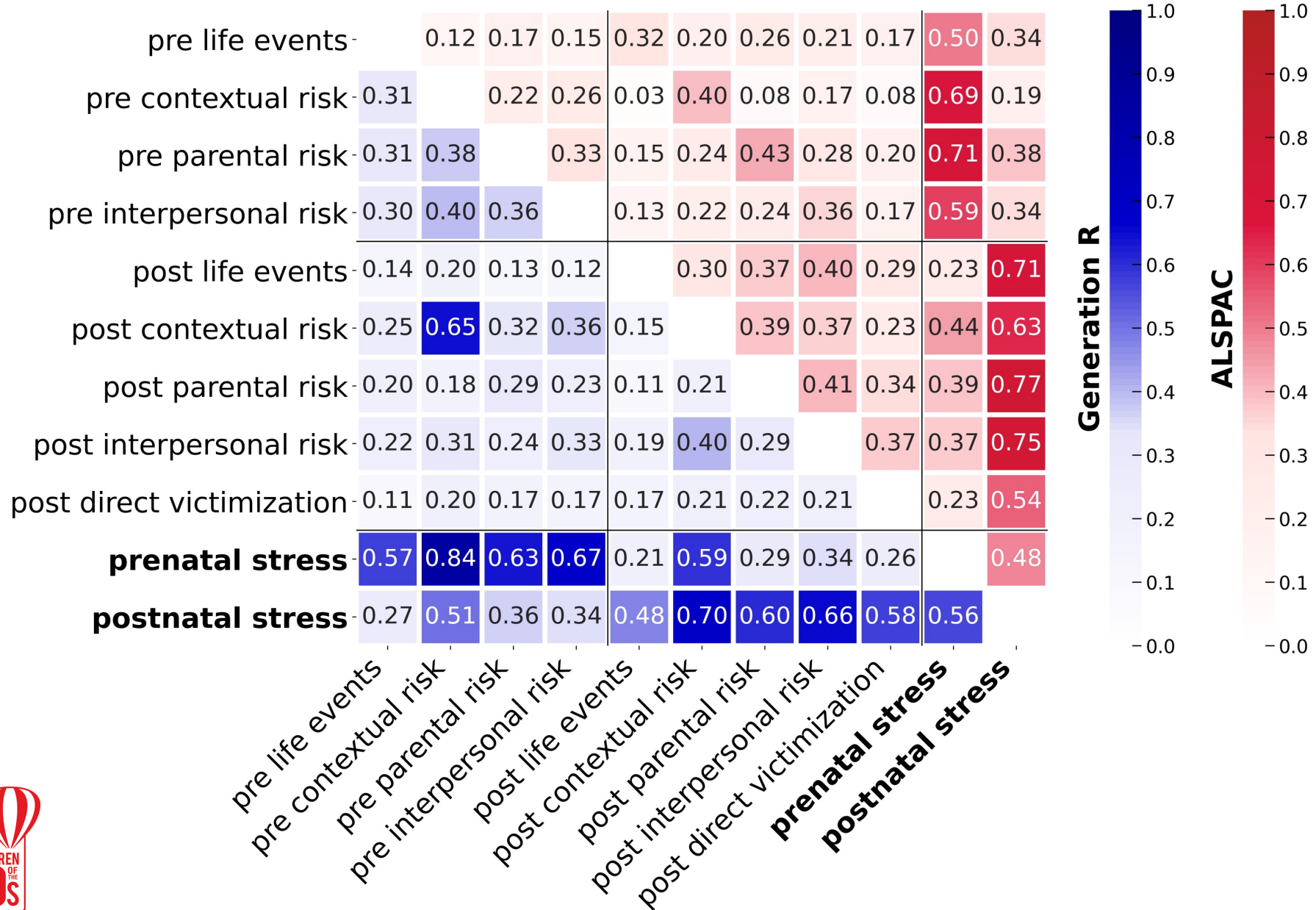


- Life events
- Contextual risk
- Parental risk
- Interpersonal risk
- Direct victimization



<https://github.com/SereDef/cumulative-ELS-score>

Stress score correlation matrix



Measures: primary health outcomes

Internalizing symptoms @13



Child behaviour checklist (**CBCL**)

→ Internalizing subscale



Strengths and Difficulties
Questionnaire (**SDQ**)

→ Emotional problems subscale



Cardio-metabolic risk @13



Fat mass percentage =

total body fat mass (kg)* / weight (kg)



Android fat mass*

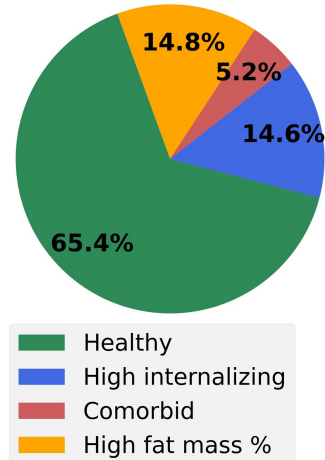
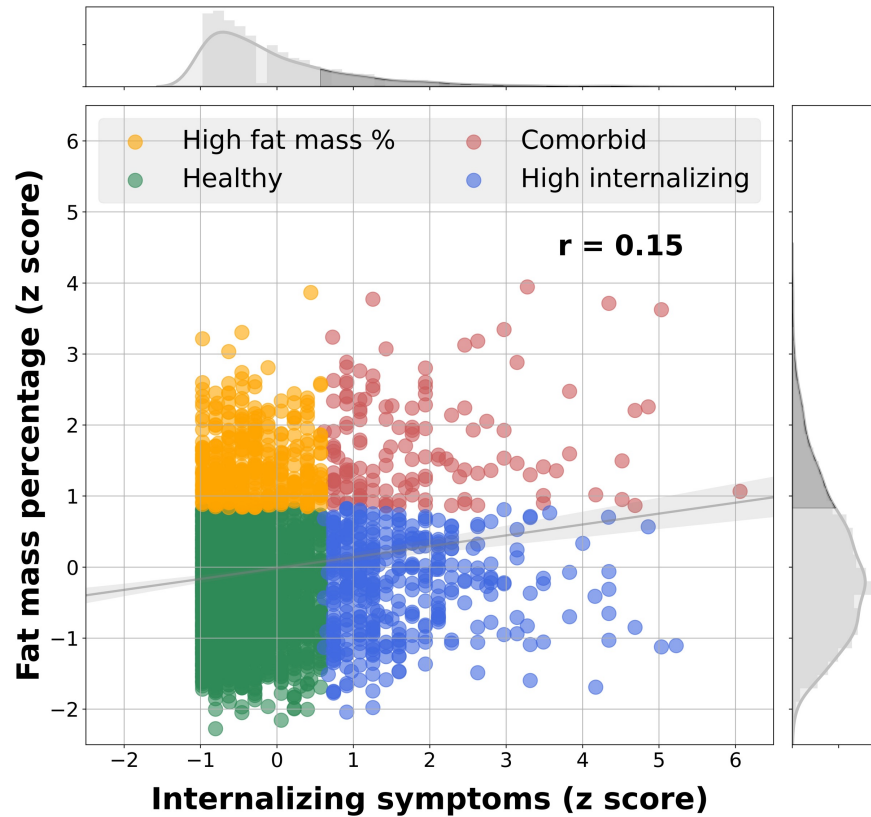
*measured using a dual-energy X-ray absorptiometry (DXA) scanner.



Measures: comorbidity outcome

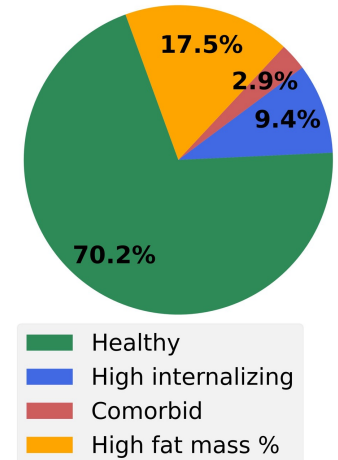
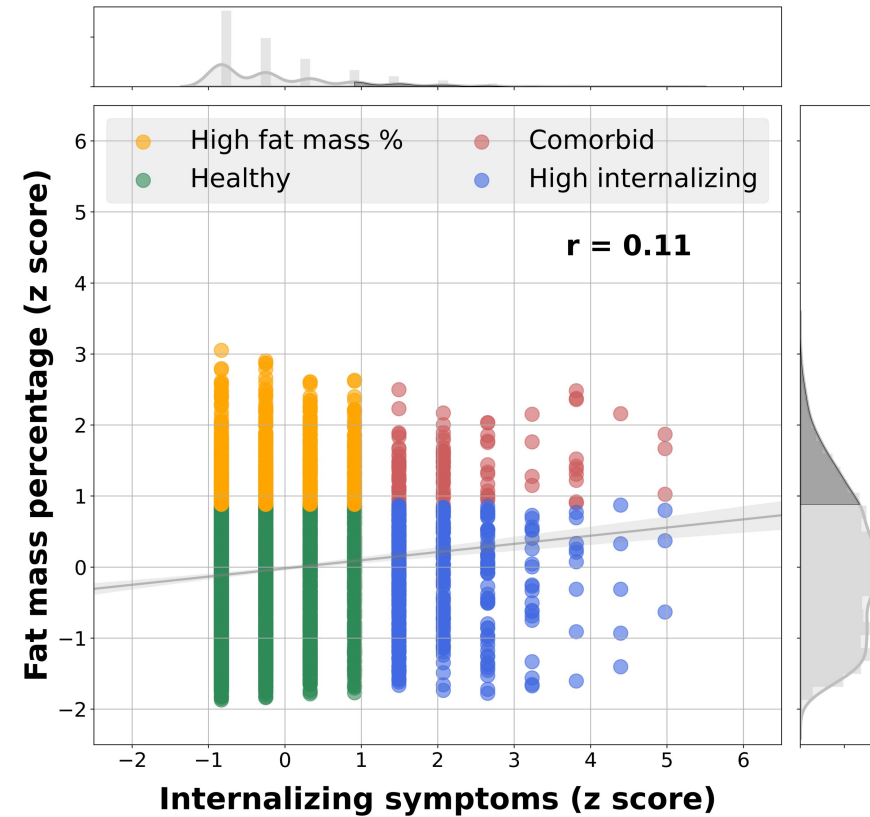
A.

Generation R



B.

ALSPAC



Modeling strategy

Prenatal contribution ► Causal mediation analysis (CMA)



- Sex
- Age
- Ethnicity
- Maternal BMI (pre-pregnancy)
- Maternal smoking (during pregnancy)
- Maternal drinking (during pregnancy)

Postnatal contribution ► Hierarchical regression analysis

- Internalizing ~
 - 0 covariates
 - 1 prenatal stress + covariates
 - 2 postnatal stress + covariates
 - 3 prenatal stress + postnatal stress + covariates
- Fat mass % ~
 - 0 covariates
 - 1 prenatal stress + covariates
 - 2 postnatal stress + covariates
 - 3 prenatal stress + postnatal stress + covariates

-
- Co-morbidity** ~
 - 1 prenatal stress + covariates
 - 2 postnatal stress + covariates

Additional analyses

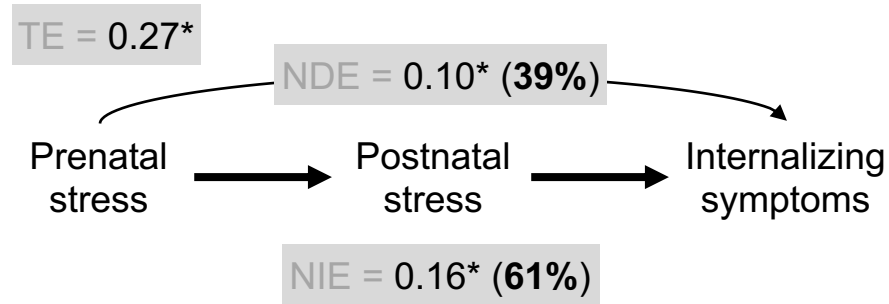
- ▶ Moderation effects of:
 - **Sex**
 - **Ethnic background**
- ▶ Individual stress **domains** as predictors;
- ▶ Sensitivity analysis:
 - responders only
 - android fat mass

Results: prenatal contribution

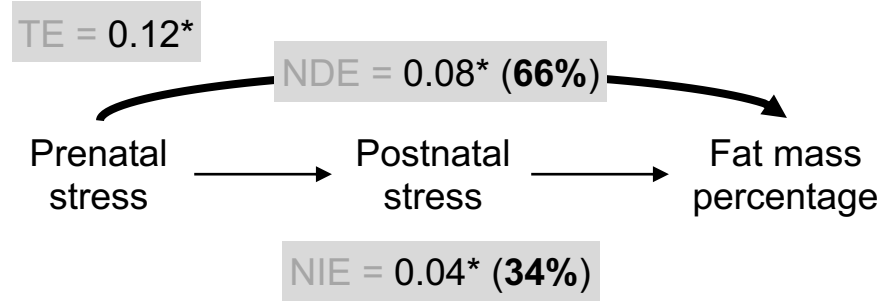


Generation R

A.

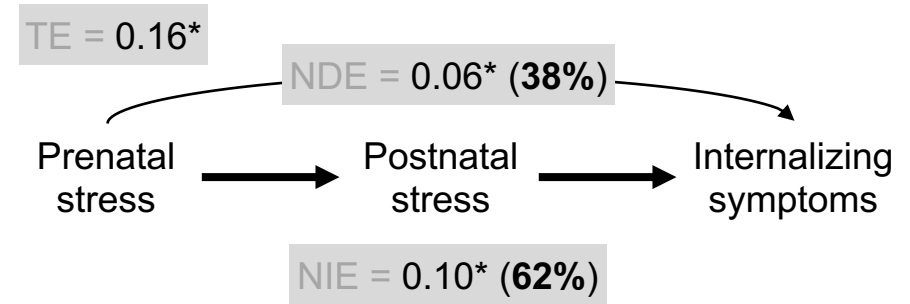


C.

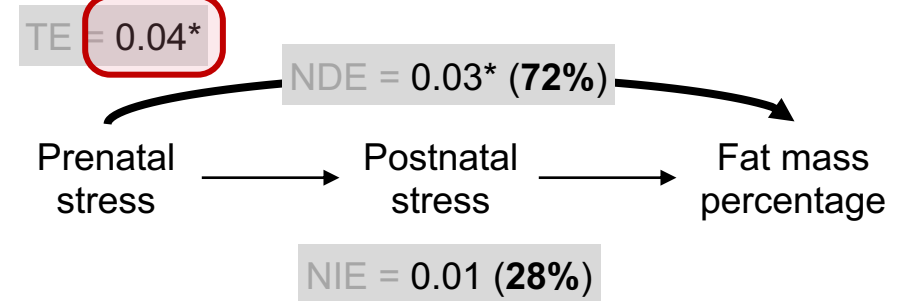


ALSPAC

B.

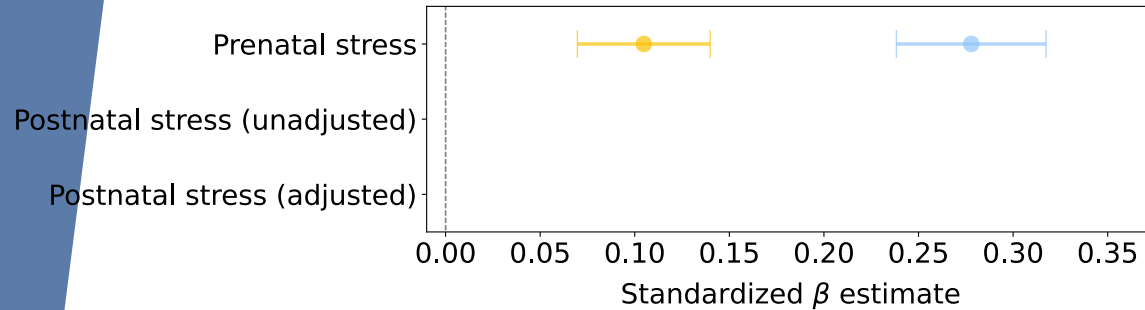


D.



Results: postnatal contribution

Generation R



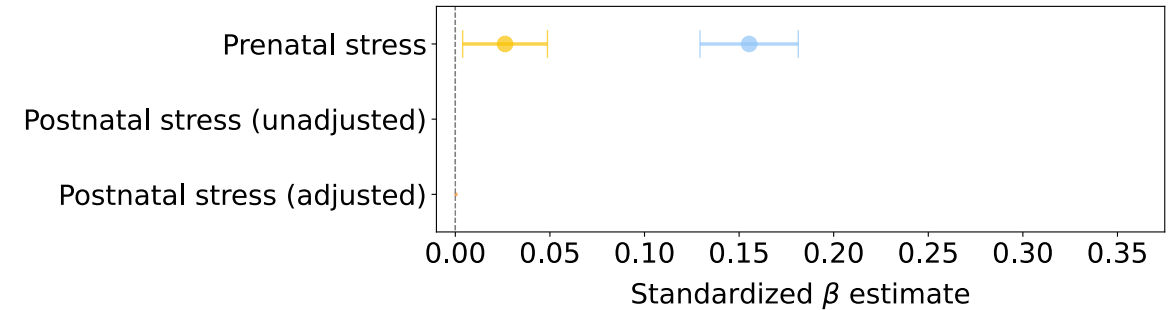
Adiposity

 $R^2 = 0.25$; $R^2_{inc} = 0.01$
 $R^2 = 0.25$; $R^2_{inc} = 0.01$
 $R^2 = 0.25$; $R^2_{inc} = 0.01$

Internalizing

 $R^2 = 0.07$; $R^2_{inc} = 0.06$
 $R^2 = 0.10$; $R^2_{inc} = 0.09$
 $R^2 = 0.11$; $R^2_{inc} = 0.10$

ALSPAC



Adiposity

 $R^2 = 0.33$; $R^2_{inc} < 0.01$
 $R^2 = 0.33$; $R^2_{inc} < 0.01$
 $R^2 = 0.33$; $R^2_{inc} < 0.01$

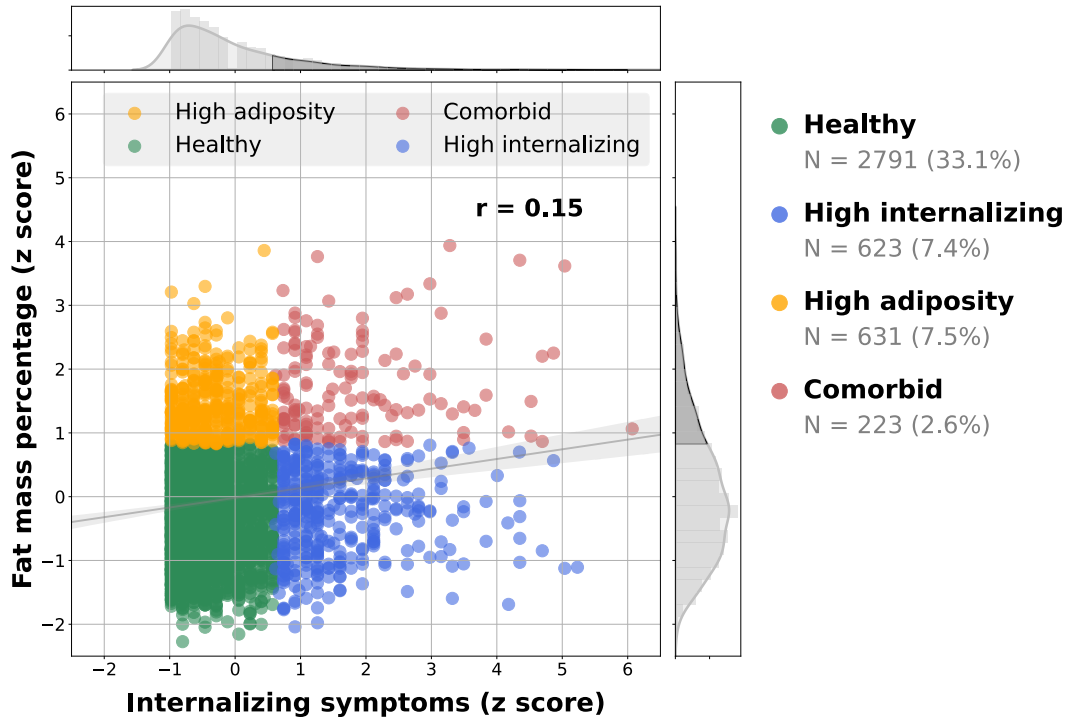
Internalizing

 $R^2 = 0.04$; $R^2_{inc} = 0.02$
 $R^2 = 0.06$; $R^2_{inc} = 0.05$
 $R^2 = 0.07$; $R^2_{inc} = 0.05$

Results: comorbidity

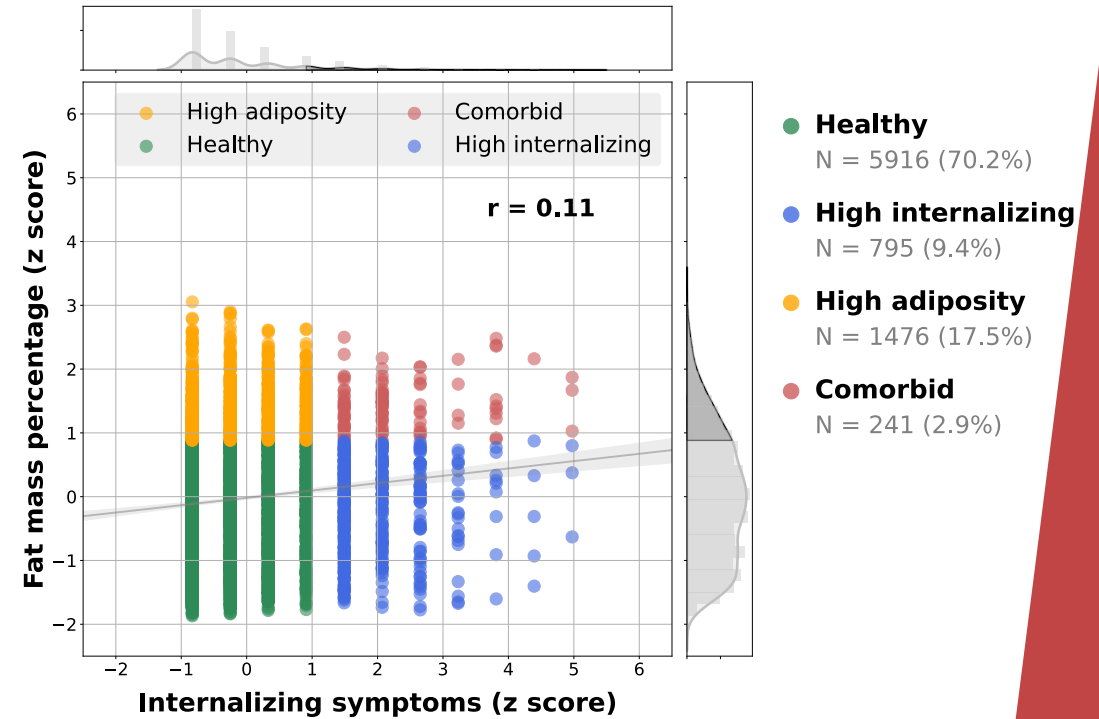
A.

GenR

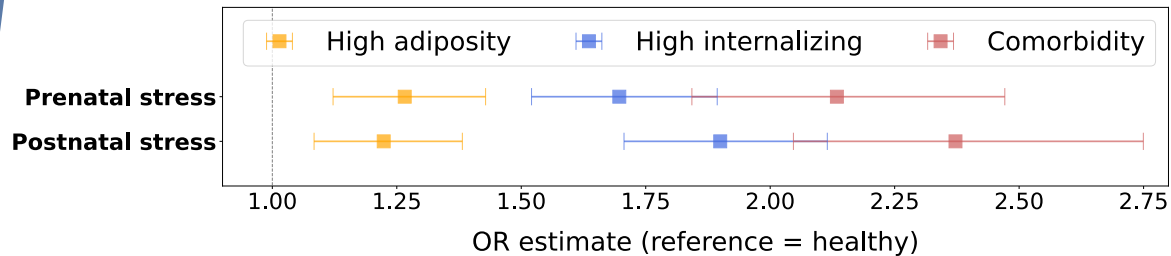


B.

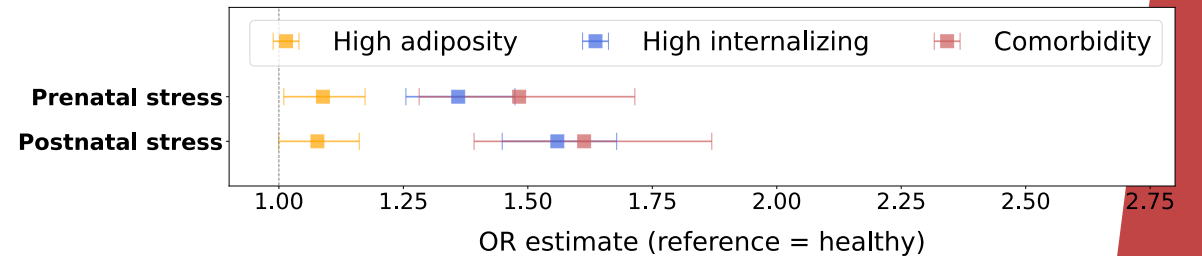
ALSPAC



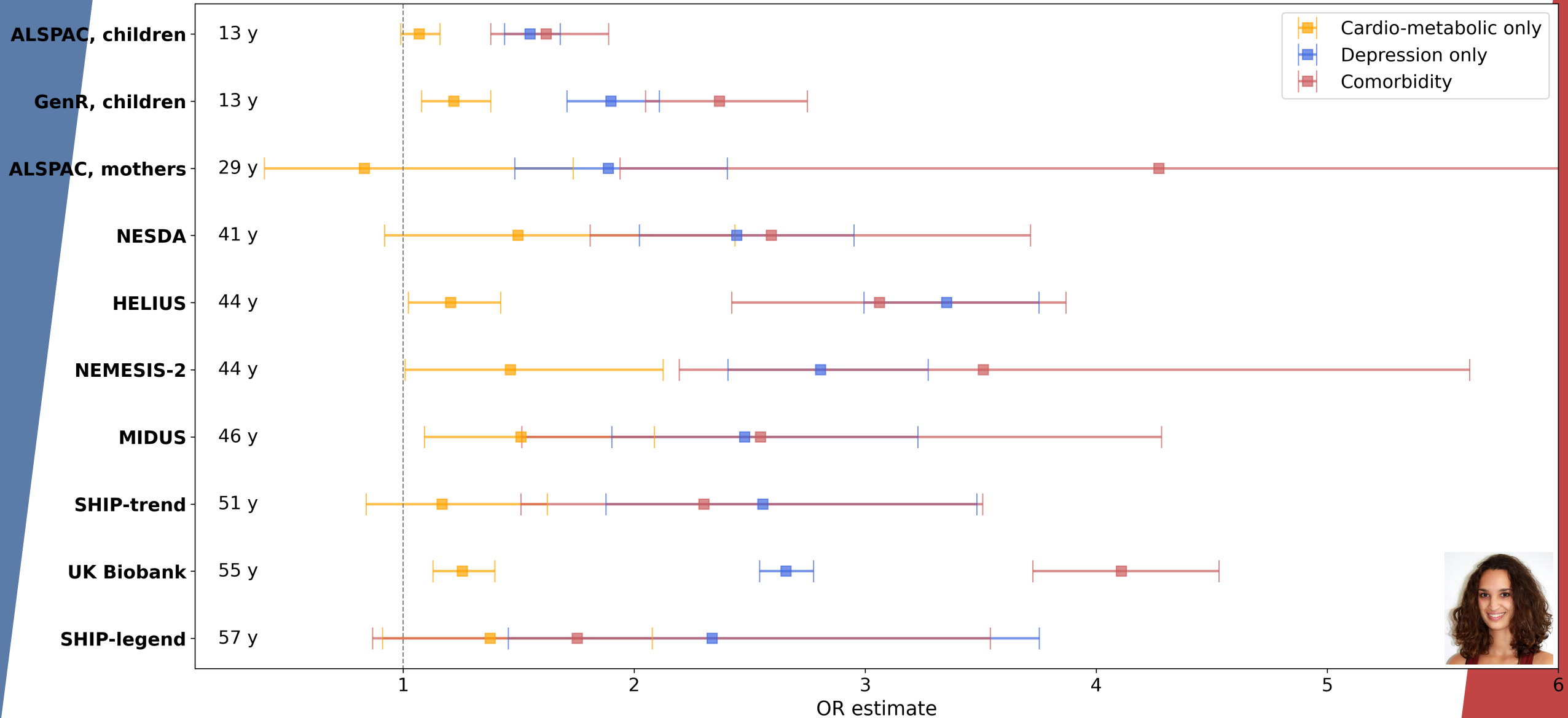
C.



D.

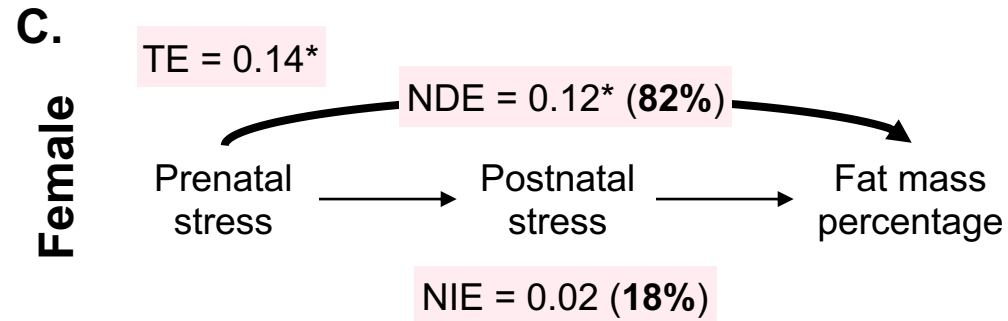
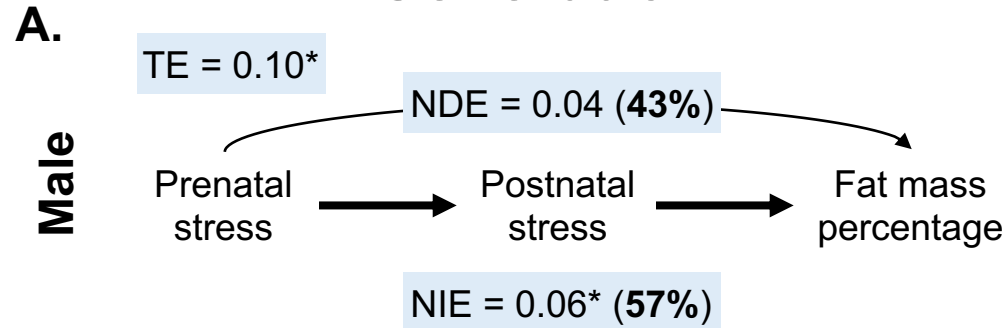


A peek across the lifespan...

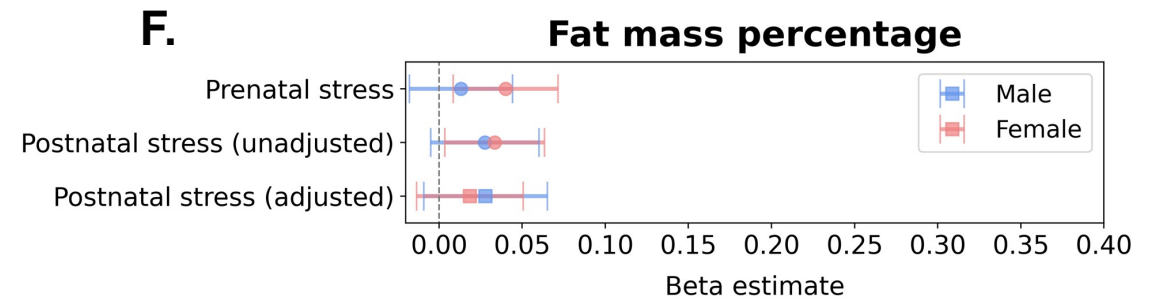
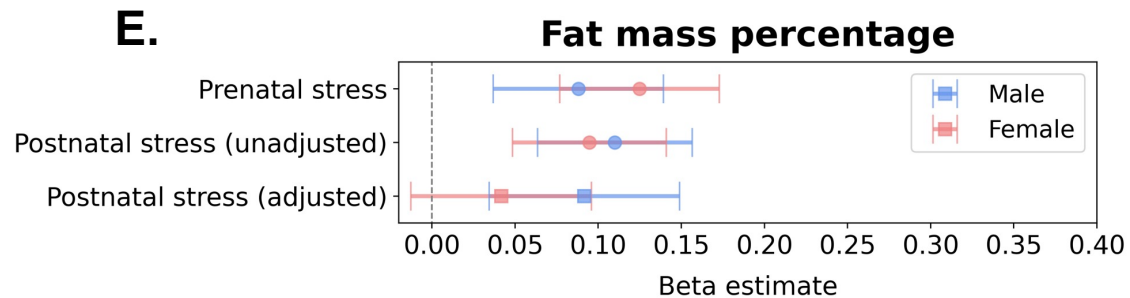
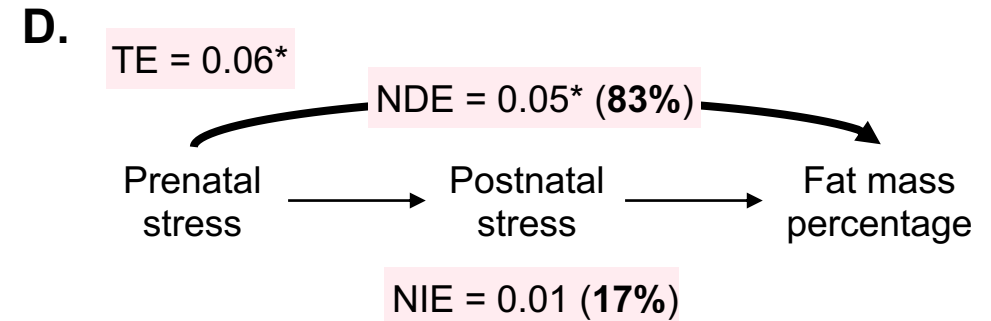
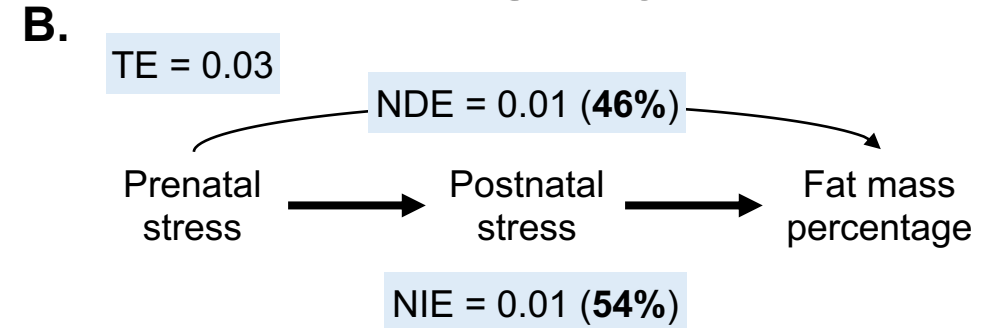


Results: adiposity **by sex**

Generation R



ALSPAC



Summary: main findings

- Both pre- and postnatal ELS predict **internalizing**, with ~60% of the effect of prenatal stress mediated through postnatal exposure.
- Prenatal ELS predicts **adiposity**, and ~70% of its effect is direct (*not* mediated through postnatal stress). Postnatal ELS was significantly associated with adiposity in Generation R only.
- Both pre- and postnatal stress predict **comorbidity**, but *not* significantly more than internalizing problems only (overlapping 95%CI).

Sex-stratified analyses

- There was some evidence of **sex-specific timing effects** on adiposity, but not internalizing or comorbidity.

Summary: additional analyses

Stress domain contribution

- Pre- and postnatal **parental risk***, postnatal **life events** and **direct victimation** consistently associated with internalizing.
- No consistent domain-specific associations for adiposity.
- Only **postnatal parental risk*** associated with comorbidity in both cohorts.

Sensitivity analyses

- Estimates did not change when restricting to respondents only or using android fat mass.

* i.e. parental psychopathology



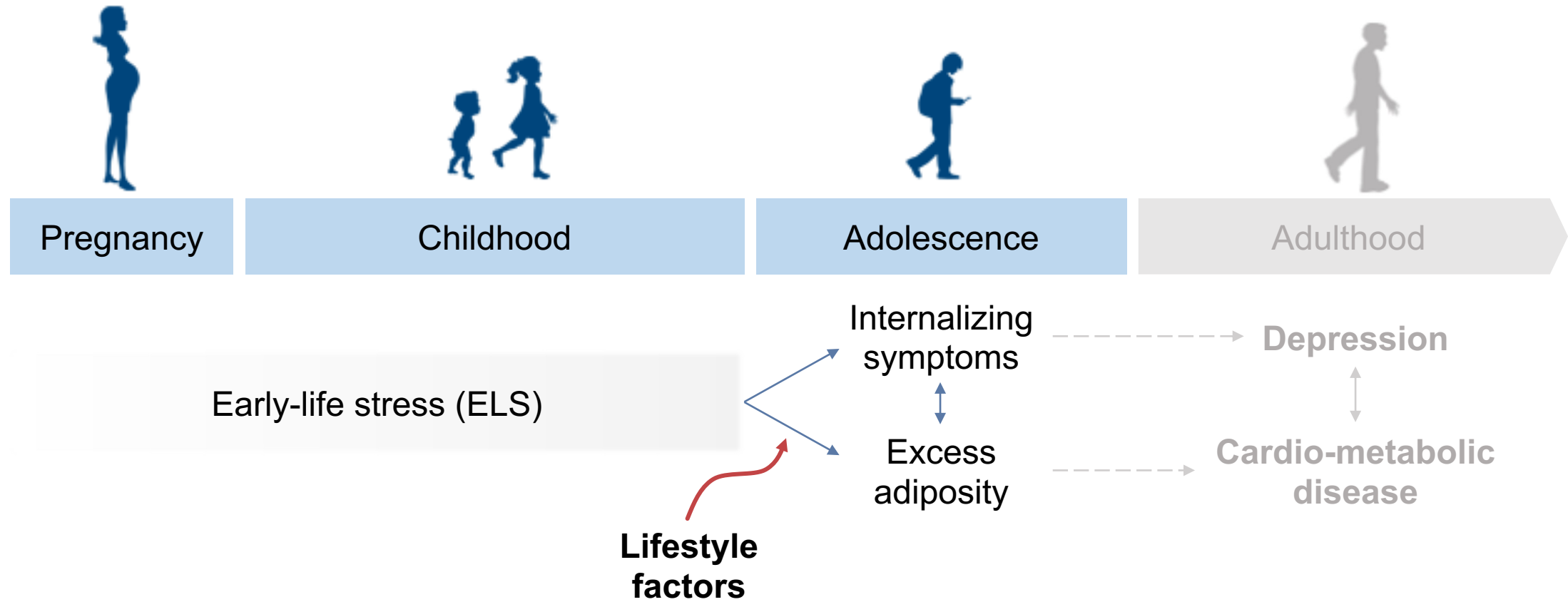
2

The role of exercise, sleep and diet in the association between ELS and psycho-cardiometabolic comorbidity

Serena Defina, Tom Woofenden, Vilte Baltramonaityte, Janine F. Felix, Charlotte A.M. Cecil, and Esther Walton

*not final byline

Background



Aims

- I. What is the role of exercise, sleep and diet in the association between ELS and adolescent health?

Main analyses



**Comorbidity
Internalizing
Adiposity**

~

ELS
Prenatal
Postnatal

*

① **Exercise**
② **Sleep**
③ **Diet**

+

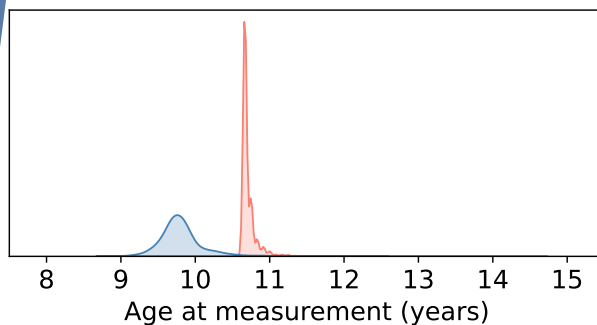
Covariates

- ▶ Sex
- ▶ Age
- ▶ Ethnicity
- ▶ Maternal BMI (pre-pregnancy)
- ▶ Maternal smoking (during pregnancy)
- ▶ Maternal drinking (during pregnancy)

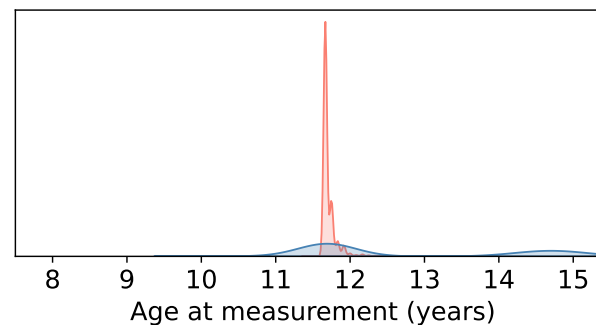
- 3 comorbidity models + 6 primary outcomes models
- 6 pre-/postnatal stress exposure models

Lifestyle factors

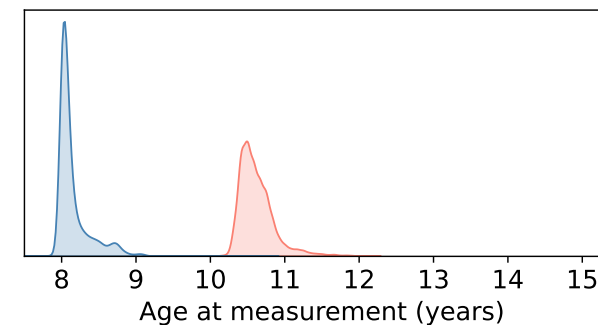
Exercise



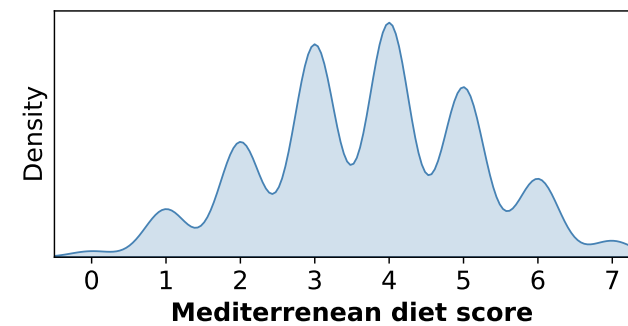
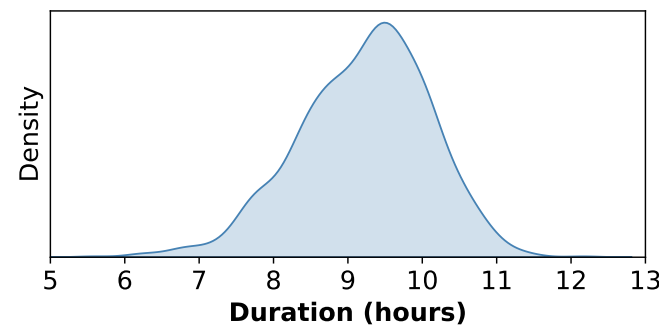
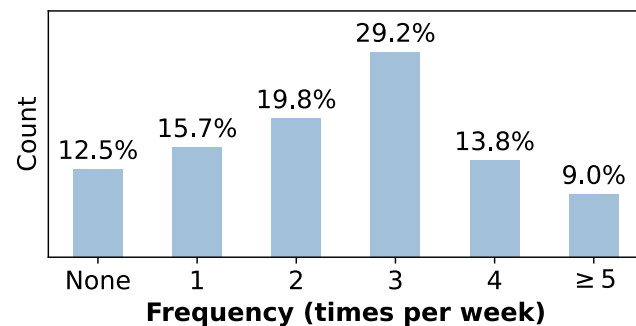
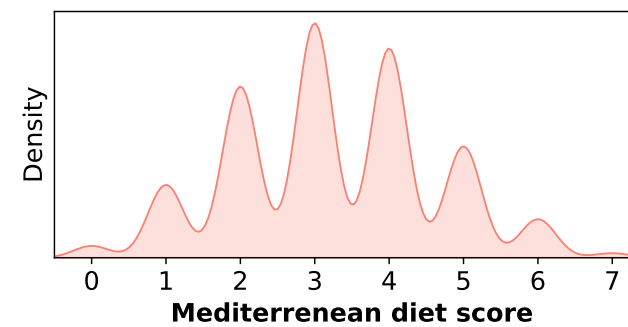
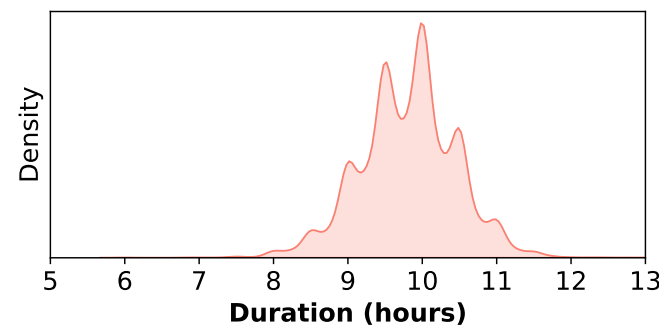
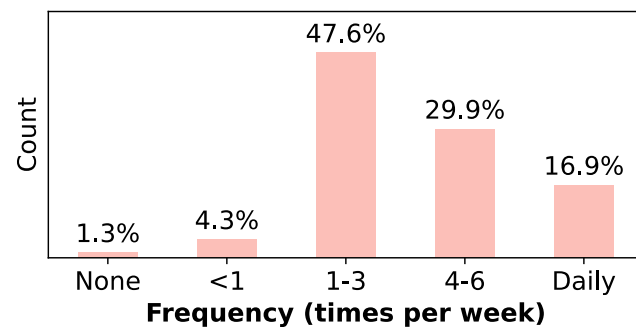
Sleep



Diet



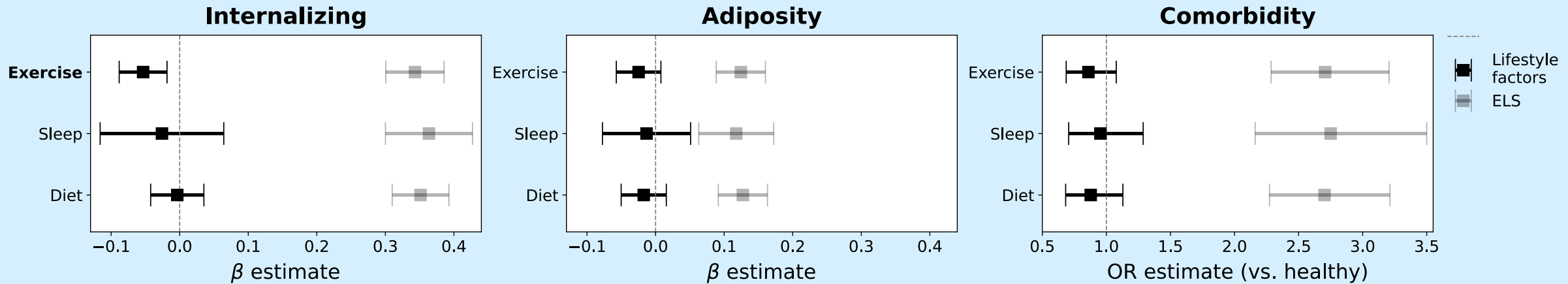
ALSPAC
Generation R



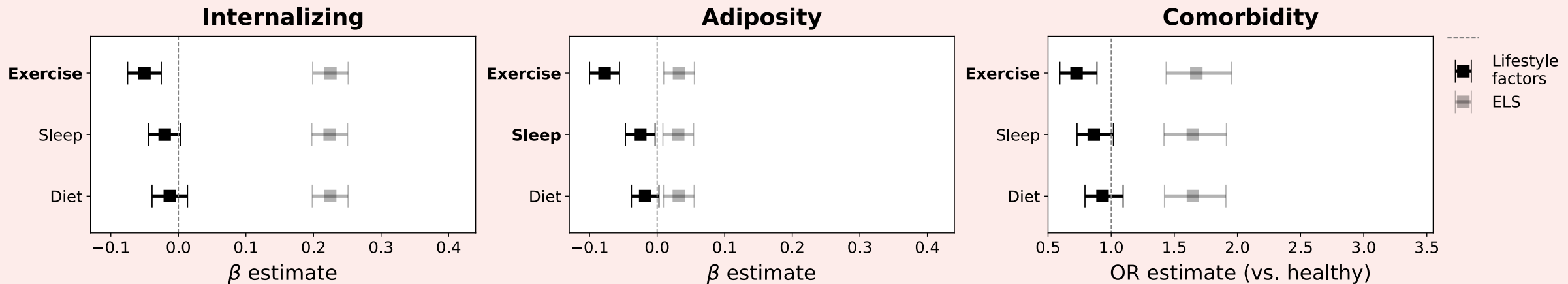
Results

MAIN EFFECTS

GENERATION R



ALSPAC

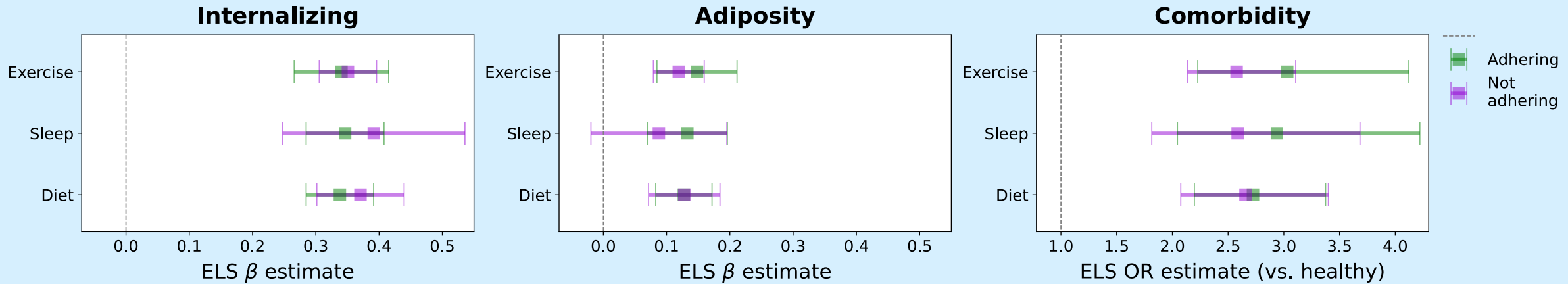


[outcome] ~ ELS * [lifestyle factor] + sex + age + ethnicity
+ maternal BMI + maternal smoking + maternal alcohol consumption

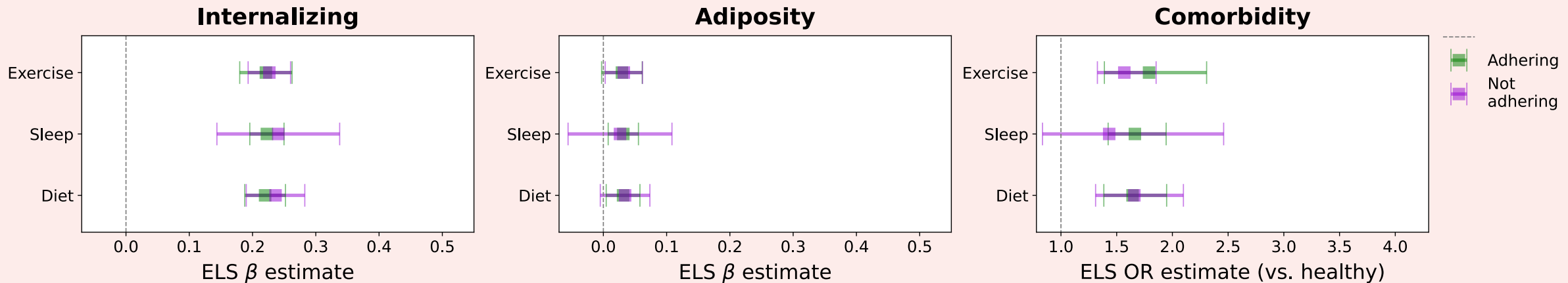
Results

INTERACTION

GENERATION R

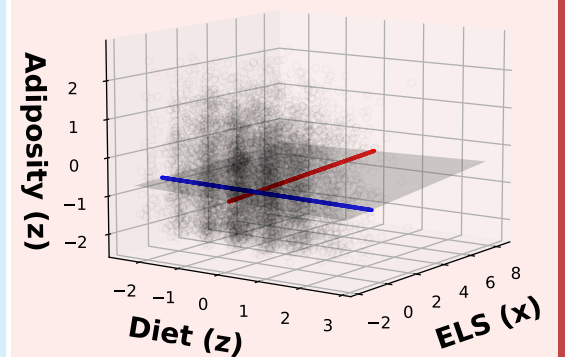
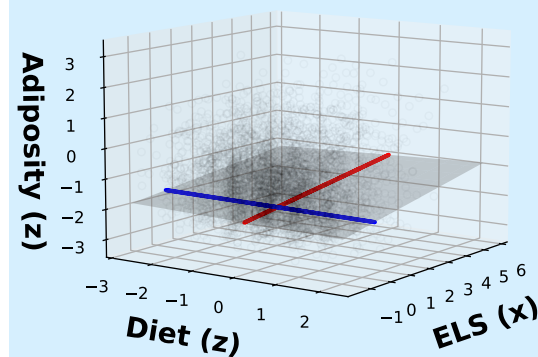
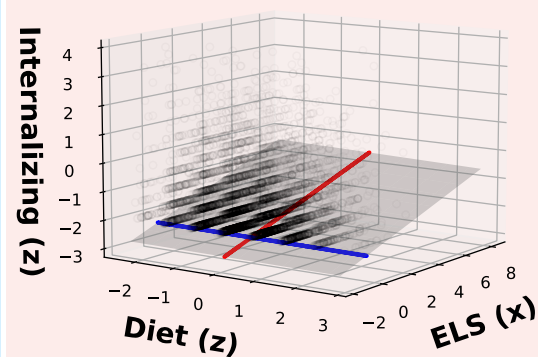
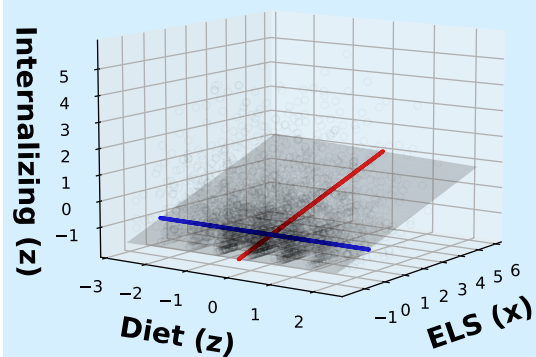
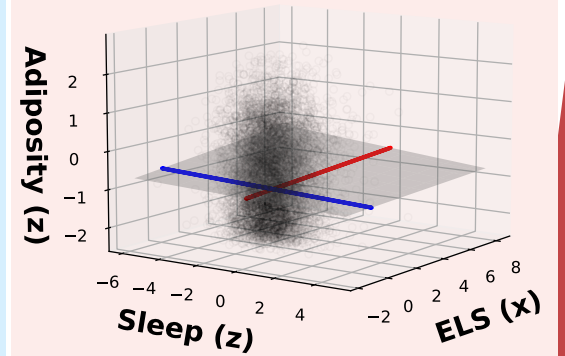
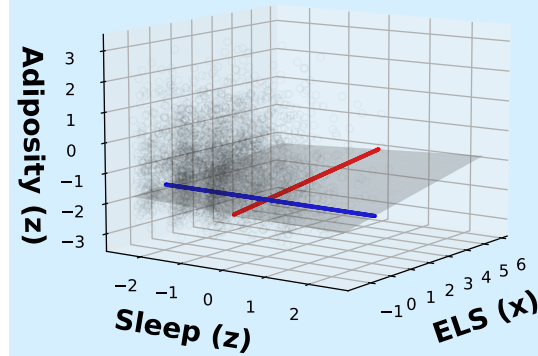
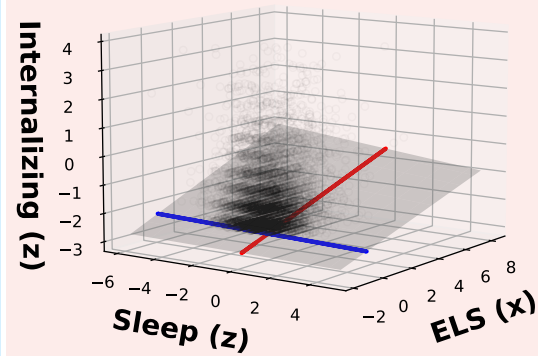
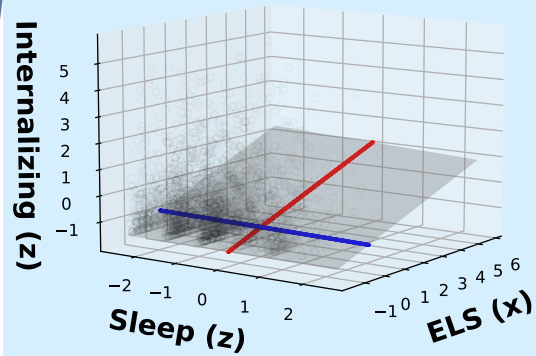
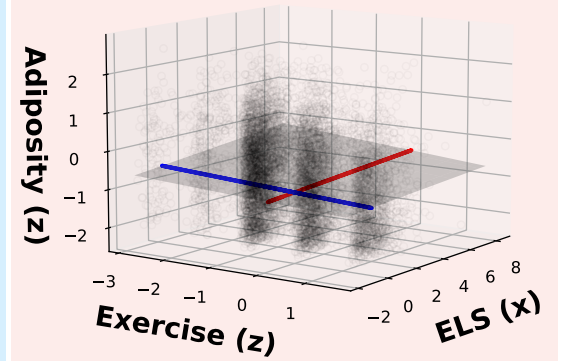
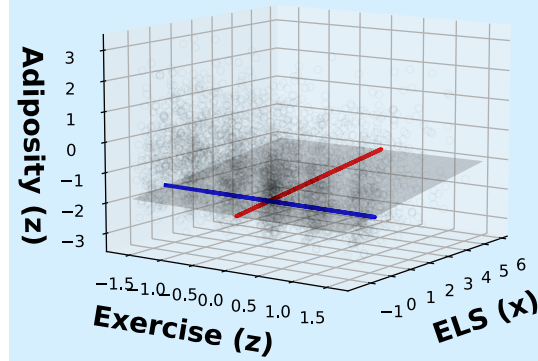
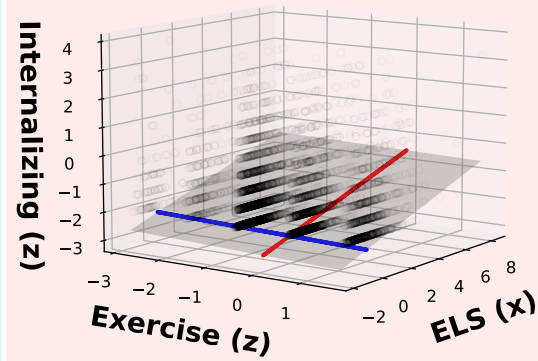
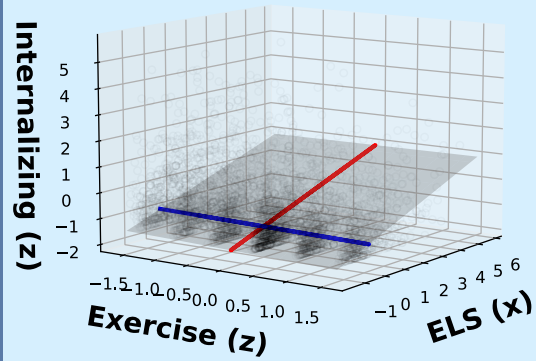


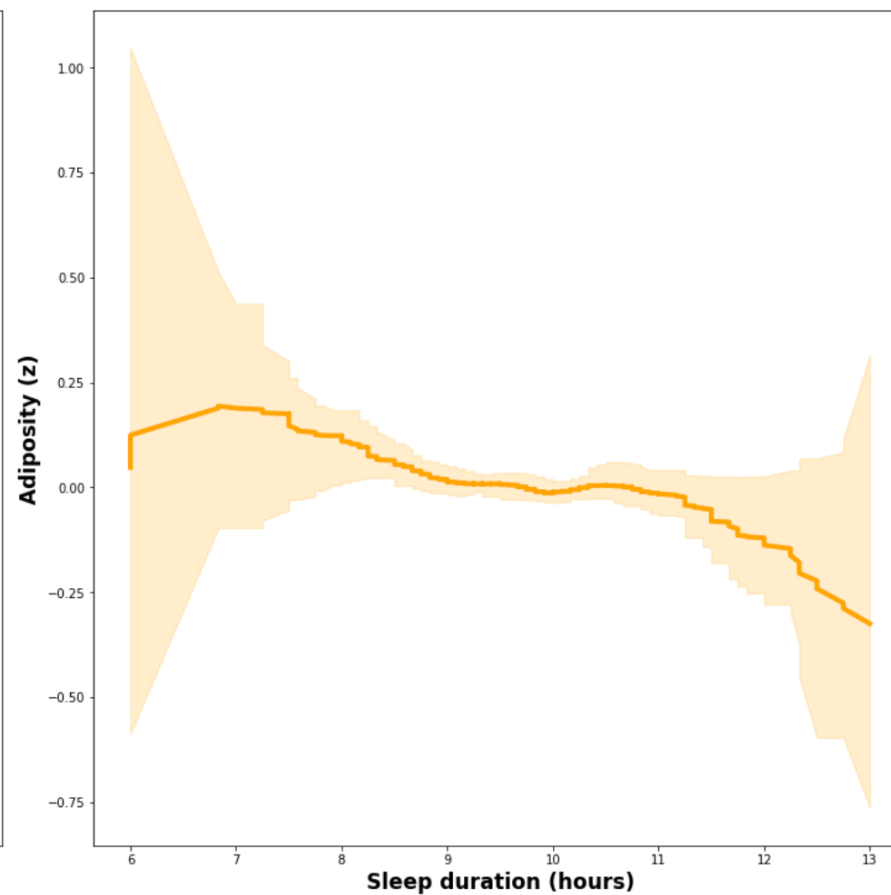
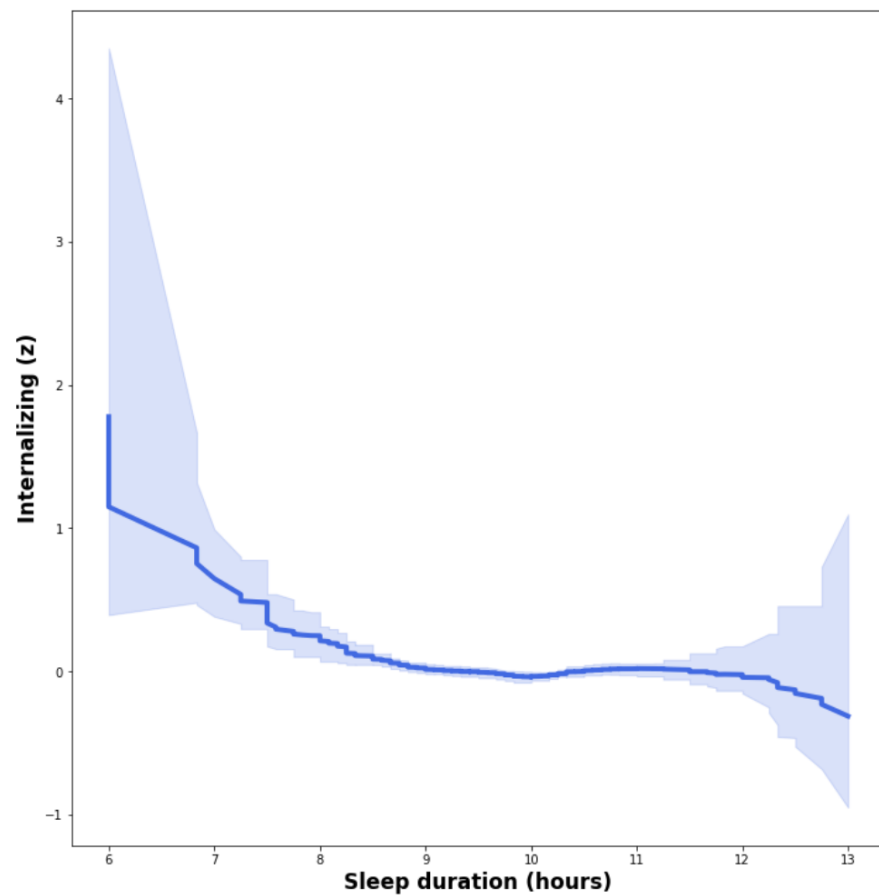
ALSPAC



[outcome] ~ ELS * [lifestyle factor (dichotomized)] + sex + age + ethnicity
+ maternal BMI + maternal smoking + maternal alcohol consumption

ADIPOSONITY





In summary...

- We did not find evidence supporting the hypothesis that lifestyle factors may attenuate the association between ELS and adolescent physical or mental health
- Sensitivity: this did not differ when prenatal and postnatal stress were examined individually
- Work in progress: non-linearities



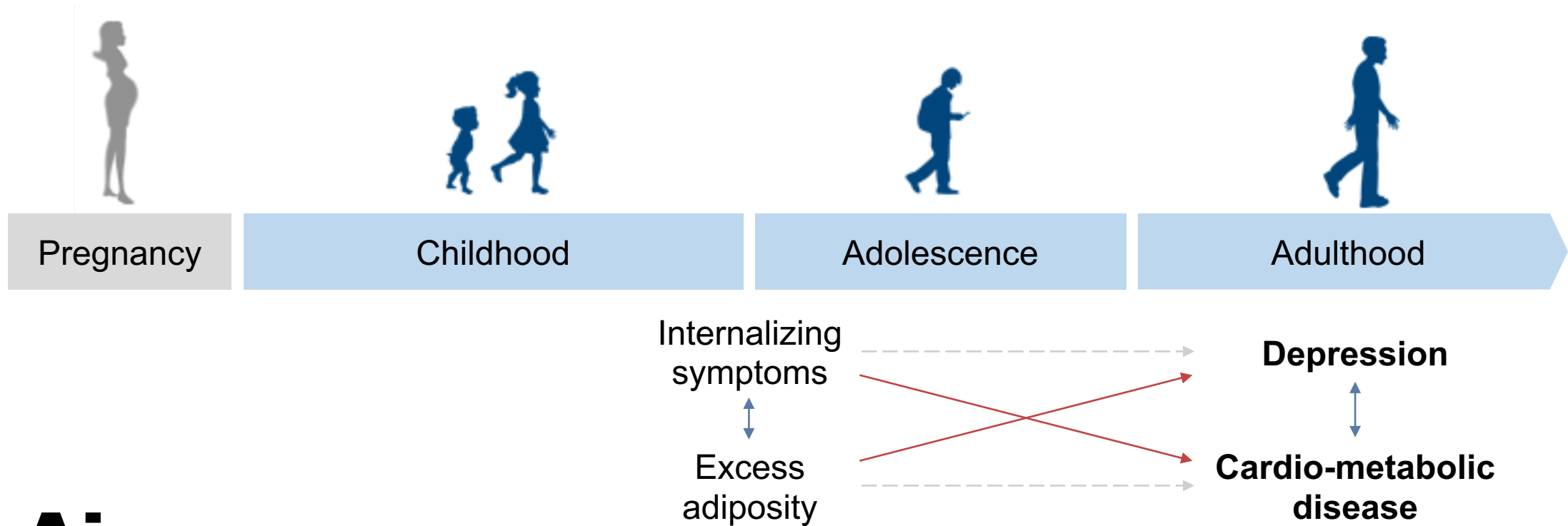
3

Cross-sectional and longitudinal relations between internalizing symptoms and cardiometabolic health from childhood to early adulthood

Serena Defina, Vilte Baltramonaityte, Janine F. Felix, Charlotte A.M. Cecil, Esther Walton, and Henning Tiemeier

*not final byline

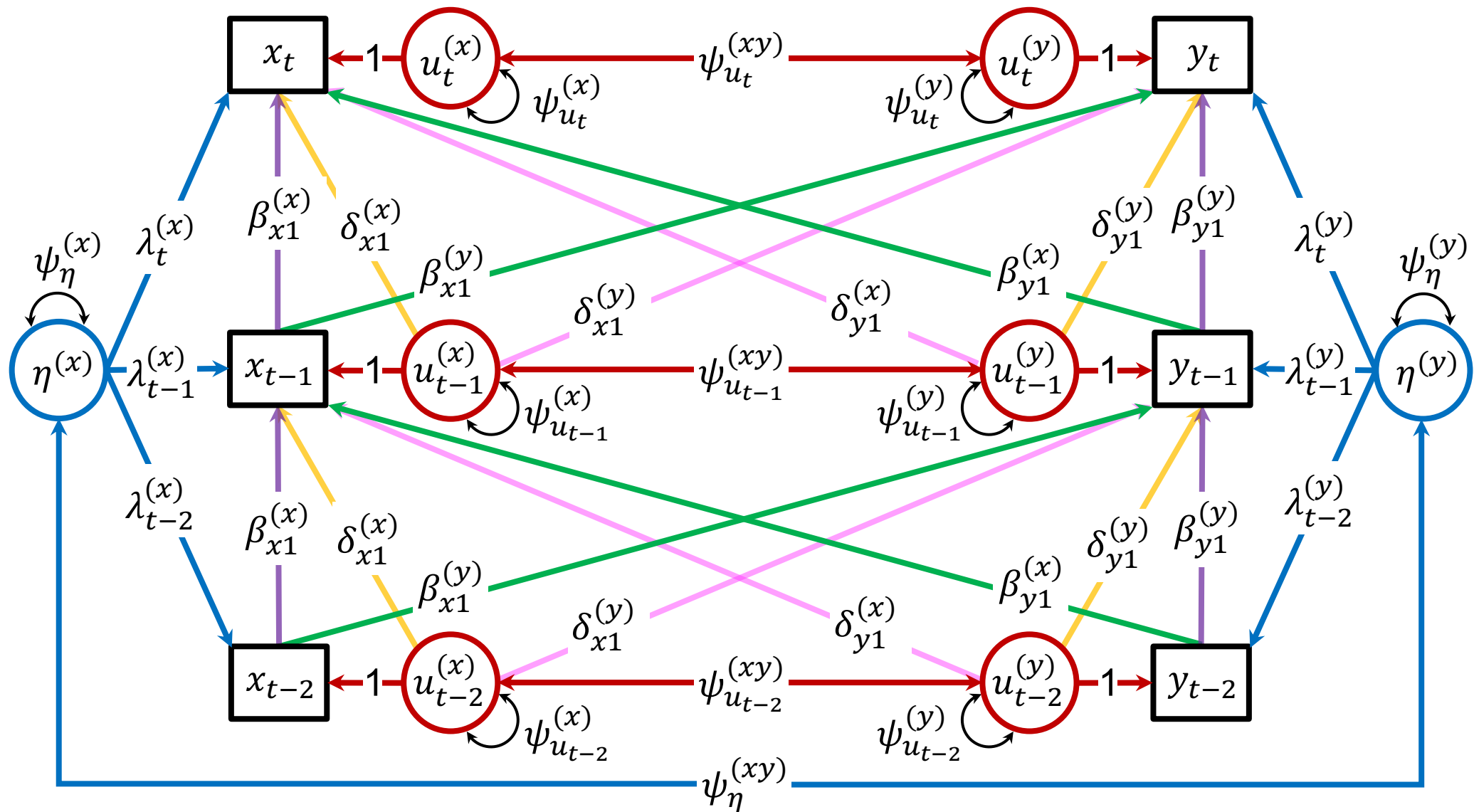
Background



Aims

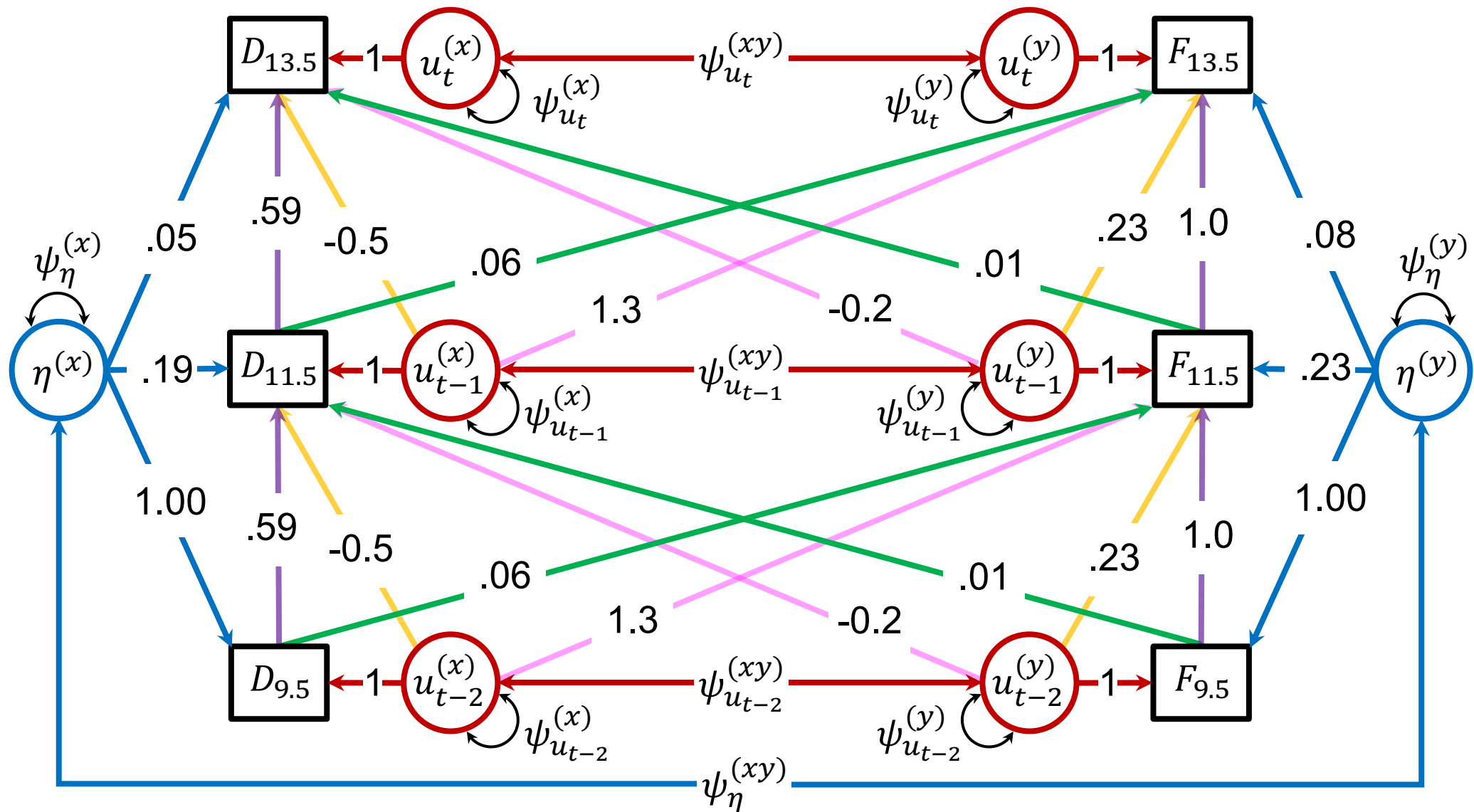
- I. Cross-sectional relationship between internalizing symptoms and cardio-metabolic health markers?
- II. Longitudinal relationship between internalizing symptoms and cardio-metabolic health?





$$x_{it} = \alpha_t^{(x)} + \lambda_t^{(x)} \eta_i^{(x)} + \delta_{x1}^{(x)} u_{it-1}^{(x)} + \beta_{x1}^{(x)} x_{it-1} + \beta_{y1}^{(x)} y_{it-1} + \delta_{y1}^{(x)} u_{it-1}^{(y)} + u_{it}^{(x)}$$

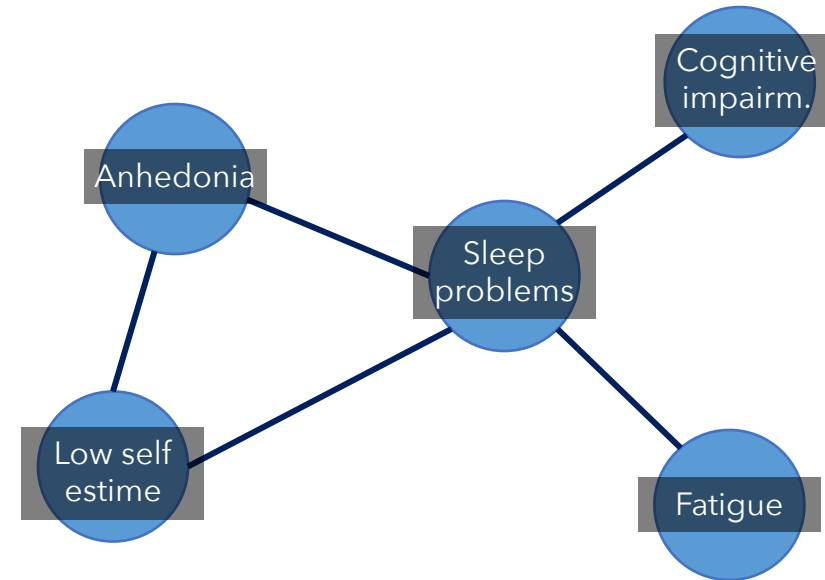
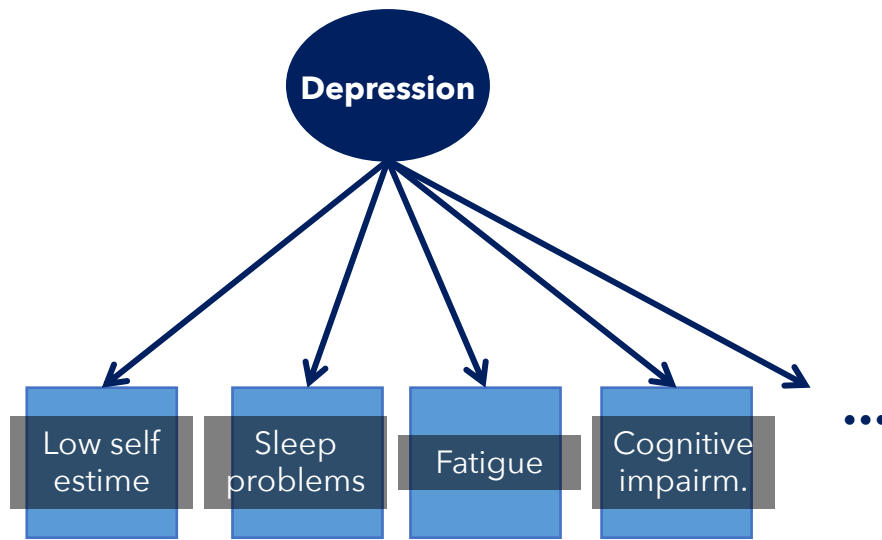
$$y_{it} = \alpha_t^{(y)} + \lambda_t^{(y)} \eta_i^{(y)} + \delta_{y1}^{(y)} u_{it-1}^{(y)} + \beta_{y1}^{(y)} y_{it-1} + \beta_{x1}^{(y)} x_{it-1} + \delta_{x1}^{(y)} u_{it-1}^{(x)} + u_{it}^{(y)}$$



$$x_{it} = \alpha_t^{(x)} + \lambda_t^{(x)} \eta_i^{(x)} + \delta_{x1}^{(x)} u_{it-1}^{(x)} + \beta_{x1}^{(x)} x_{it-1} + \beta_{y1}^{(x)} y_{it-1} + \delta_{y1}^{(x)} u_{it-1}^{(y)} + u_{it}^{(x)}$$

$$y_{it} = \alpha_t^{(y)} + \lambda_t^{(y)} \eta_i^{(y)} + \delta_{y1}^{(y)} u_{it-1}^{(y)} + \beta_{y1}^{(y)} y_{it-1} + \beta_{x1}^{(y)} x_{it-1} + \delta_{x1}^{(y)} u_{it-1}^{(x)} + u_{it}^{(y)}$$

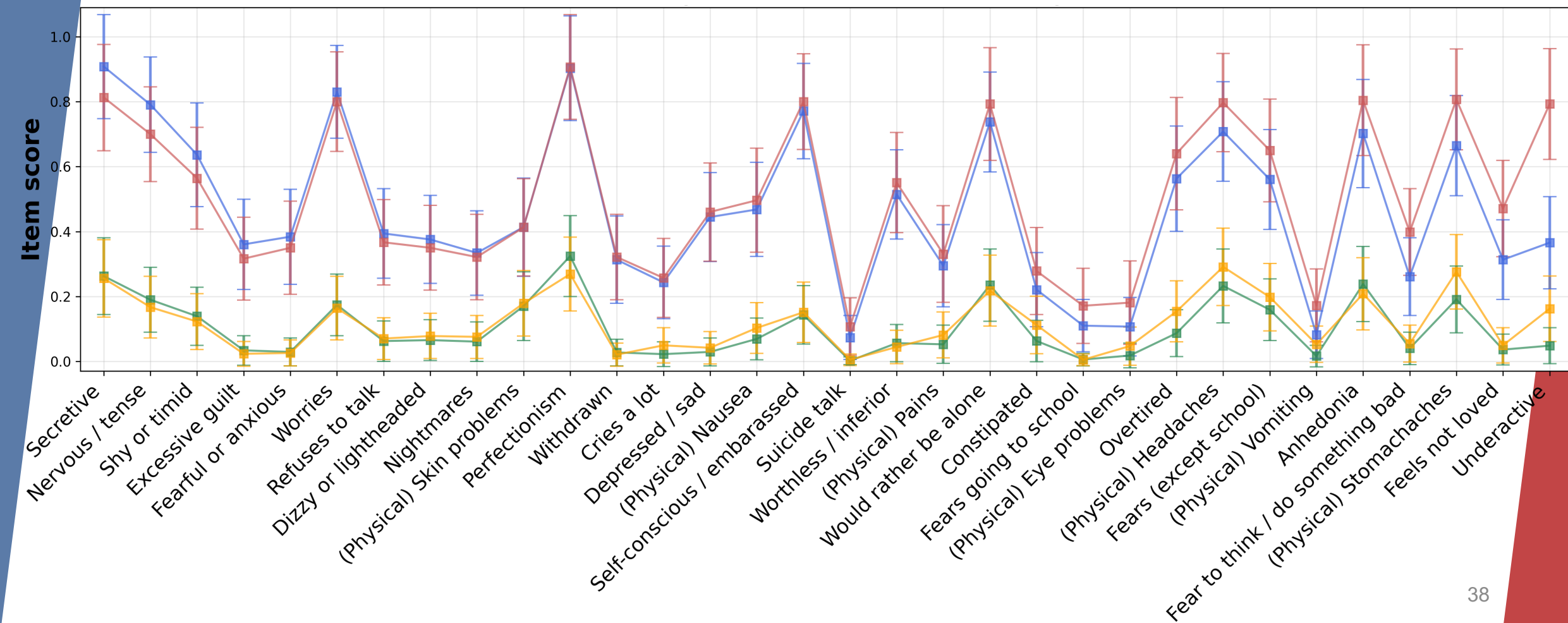
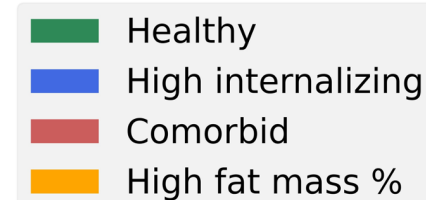
Health is complicated...



Cramer, A. O. J., Waldorp, L., van der Maas, H., & Borsboom, D. (2010). Comorbidity: A Network Perspective. *Behavioral and Brain Sciences*, 33(2-3), 137– 150. doi: 10.1017/S0140525X09991567

Borsboom, D. (2017). A network theory of mental disorders. *World Psychiatry*, 16(1):5–13.

Internalizing symptoms per outcome group

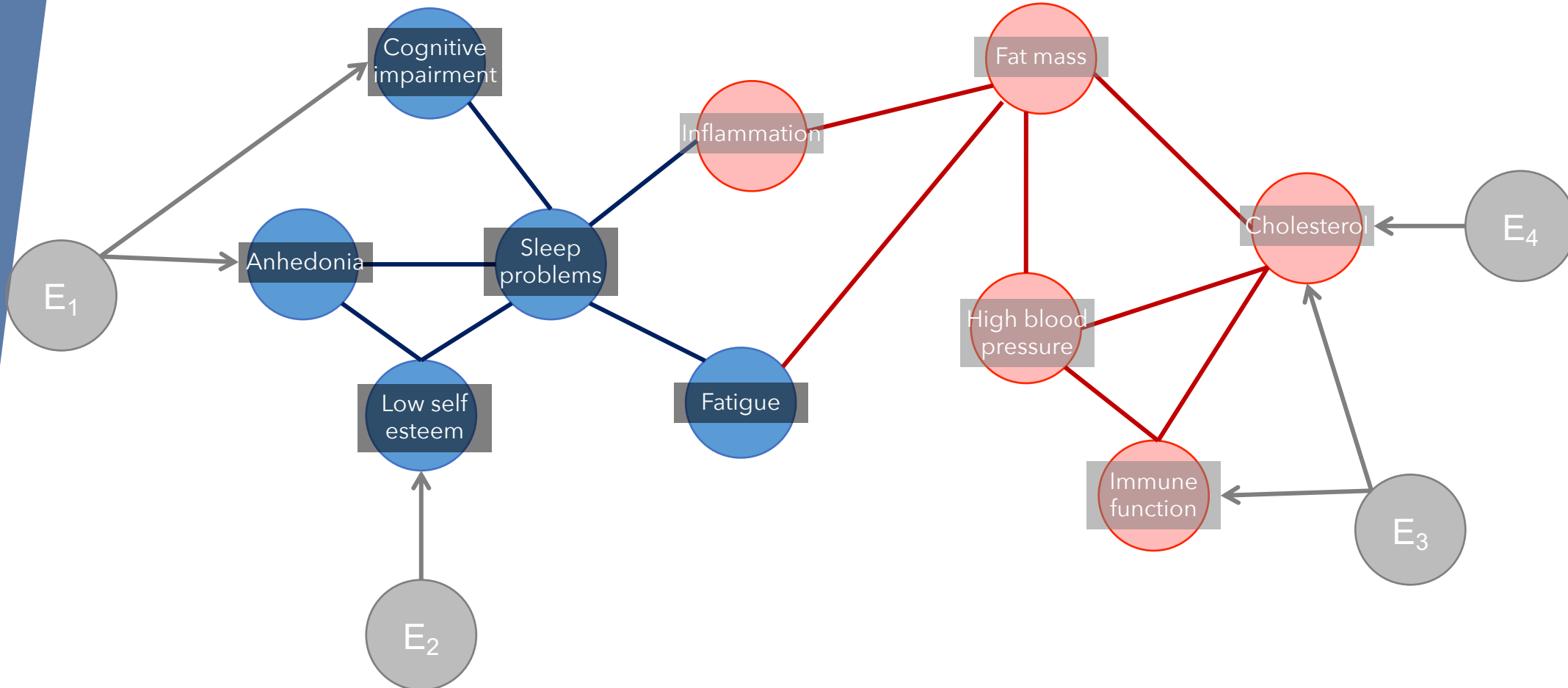


Network models of comorbidity

Symptom
network A

Bridge
symptoms

Symptom
network B



Questions?