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Friday, Day 13th September 2024

THEMATIC SESSION

**“CLINICAL PSYCHOLOGY IN MEDICAL CONDITIONS:
ADVANCES AND PERSPECTIVES OF RESEARCH AND
INTERVENTIONS”**

Chair:

Caterina Grano

Sapienza University of Rome

Alexithymia and Hypertension: Does Personality Matter? A Systematic Review and Meta-analysis.

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Abstract

Introduction: Personality characteristics, such as alexithymia, may lead to alterations in the autonomic nervous system functionality, predisposing individuals to an increased risk of hypertension (HTN). The present systematic review and meta-analysis was conducted to address the following objectives: 1) To quantify the presence of alexithymia in people with HTN; 2) To clarify if the prevalence and mean level of alexithymia are higher in people with HTN than in individuals without HTN; 3) To examine the possible influence of specific factors (i.e., sex, age, and year of article publication) on alexithymia.

Methods: A systematic review and meta-analysis was performed in line with the guidelines of the Preferred Reporting Items for Systematic Reviews and Meta-analysis Protocols (PRISMA). PubMed, PsycINFO and Scopus databases were systematically searched, using the following strings with Boolean operators: (“alexithymia” OR “alexithymic”) AND (“hypertension” OR “hypertensive”). Data were meta-analyzed with random-effects models.

Results: A total of 13 studies met the inclusion criteria. The overall prevalence of alexithymia in people with HTN was 32% based on data of 10 studies. The prevalence of alexithymia in people with and without HTN were obtained from 5 studies (26.3% vs 15.0%; pooling of odd ratios, 3.15 [95% CI, 1.14;8.74]), whereas the mean level of alexithymia in people with and without HTN was obtained from 7 studies Hedges g, 1.39 [95% CI, -0.39;3.16]). There was a significant association between alexithymia prevalence and year of article publication ($\hat{g} = -0.04$; 95% CI, -0.07; -0.01), whereas no significant relationship was detected between the former and both sex and age.

Discussion: Findings revealed a greater prevalence of alexithymia in people with HTN than those without HTN. These findings suggest that alexithymia may contribute to both the onset and persistence of HTN symptomatology. However, future research is needed to clarify this association. Psychological interventions might be implemented, focusing on improving the ability to identify emotions and on



increasing adaptive emotional regulation processes in individuals with HTN. In this way, the maintenance of treatment adherence and the quality of life of these patients could be enhanced.