Original Research Article

Investigation of factors affecting adult erythrocyt sedimentation rateJamshid Ayatollahi ^{1, 2}, Forouzan Desin ^{3,*}, Mohammad Sharifyazdi ¹, Seyed Alireza Mousavi ¹,
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ABSTRACT

Various factors are effective in reduction or increase of Erythrocyte Sedimentation Rate (ESR). This study was designed to investigate the effective factors on ESR in adults participating study in Yazd in Iran. In this study, the data in cohort study was used. The variables of age, sex, Body Mass Index (BMI), alcohol consumption, smoking, infection, inflammation, cancer, and blood pressure were collected. There is a significant relationship between age, sex, systolic blood pressure, BMI, physical activity, joint and heart pain, osteoporosis and smoking history with ESR. Cancer history and diastolic blood pressure variables have no significant effect on ESR values. Results showed that ESR levels in an adult population are generally affected by age and sex.

Keywords: Erythrocyte sedimentation rate, age, sex, BMI

INTRODUCTION

ESR is an easy and inexpensive method that helps in early detection of mild inflammation and to follow the response to treatment [1,2]. The unit of this test is millimeters per hour [3]. This test is also used to identify latent diseases [4]. Sometimes an ESR test can help differentiate a disease or cause a patient to

complain. For example, in a patient with chest pain, the ESR increases in the presence of myocardial infarction but is normal in the presence of angina [5,6]. Some studies have suggested that this test may be useful as an indicator of illness or as a tool for screening about a specific disease [7]. High ESR, defined above 100, is important for important underlying diseases including infections such as tuberculosis abscesses, collagen vascular disease, and malignancies [8,9]. An ESR above 100 in the first hour indicates a bad prognosis [10]. Diseases associated with elevated proteins such as hyperfibrinogenemia, as well as diseases associated with elevated serum protein levels, cause elevated ESR [11]. In severe anemia (such as iron deficiency or B12 deficiency), the rate of deposition increases with decreasing red blood cell volume [12,13]. Chronic lymphocytic leukemia [14], polycythemia [1], chronic anemia [15] and aspirin [16] treatment reduce ESR. The factors involved in decreasing or increasing ESR are varied [17].

This study was designed to investigate the factors affecting the ESR in adults participating in the YAS study in Yazd.

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MATERIALS AND METHODS

The present study was a descriptive cross-sectional study. It was approved in the ethics committee of Shahid Sadoughi University of Medical Sciences of Yazd, Iran with the code of IR.SSU.REC.1399.084, the data contained in the YAS project was used.

The investigated variables in this study that were extracted from the mentioned project included age, sex, Body Mass Index (BMI), alcohol consumption, smoking, physical activity, infection, inflammation, cancer, body temperature and aspirin use. Sampling was by census and cases with incomplete information were excluded from the study.

Finally, statistical analysis was performed using SPSS (version 14). Klomogorov-Smirnov statistical test was used to evaluate the normality of data distribution and descriptive statistics were used to determine the mean and standard deviation indices.

Chi-square was used to investigate the relationship between qualitative variables with decreasing or increasing ESR. Totally, Chi-square, Pearson correlation coefficient and logistic regression tests were used to analyze the data at a significant level of 5 %.

RESULTS

In the present study, 1408 adult persons participated including 528 (37.5 %) men and 880 (62.5 %) women. There was a significant relationship between the ESR and age and gender parameters (p=0.000) (Table 1).

Based on the results of the present study, there was a significant relationship between systolic blood pressure and the ESR mean (p=0.014), but no significant relationship was found with diastolic blood pressure (p=0.845) (Table 2).

There was also a significant relationship between BMI and physical severe activity

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per week (p=0.000) with the ESR average (Table 3).

The results also showed a significant relationship between heart pain (0.020), osteoporosis (p=0.000), joint pain (p=0.000) and smoking (p=0.002) with the ESR mean (Table 4).

Finally, the results showed that there was no a significant relationship between the history of cancer particularly skin (p=0.337), breast (p=0.111) and prostate (p=0.768) cancers with the ESR mean.

Table 1. The relationship between the ESR mean with age and gender

ESR mean	Standard	p value
	deviation	
12.47	3.204	
14.24	3.257	
15.65	3.505	
17.64	7.079	
18.65	8.798	0.000
13.09	7.153	
19.16	5.014	
	12.47 14.24 15.65 17.64 18.65	deviation 12.47 3.204 14.24 3.257 15.65 3.505 17.64 7.079 18.65 8.798 13.09 7.153

Table 2. The relationship between systolic and diastolic blood pressure and the ESR mean

Systolic blood pressure	ESR mean	Standard	p value
		deviation	
Below 90	15.55	7.580	
90-119	15.95	6.458	0.014
120-139	16.56	5.274	0.014
140-159	17.11	4.709	
Above 160	18.70	2.241	
Diastolic blood pressure			
Below 90	16.25	4.721	
90-119	16.71	5.954	0.845
120-139	17.09	5.642	
140-159	16.25	5.592	
Above 160	21.05	2.915	

Table 3. The relationship between BMI and physical severe activity per week with the ESR average

Body mass index	ESR average	Standard	p value
		deviation	
18.5>	12.81	2.693	
18.5-24.9	14.70	6.998	
25-29.9	15.67	4.489	
30-39.9	16.69	6.637	
Above 40	21.06	6.947	
Severe activity			
Never	17.39	7.474	0.000
once a week	13.31	6.004	
Twice a week	16.43	9.434	
Three to four times per week	14.49	3.417	
Five or more per week	16.16	3.014	

Table 4. The relationship between heart pain, osteoporosis, joint pain and smoking with the ESR mean

Heart pain	ESR average	Standard deviation	p value
Yes	20.81	2.756	0.020
No	16.42	5.449	
Osteoporosis			
Yes	22.63	7.204	0.000
No	16.19	5.838	
Joint pain		l l	
Yes	19.95	6.853	0.000
No	15.21	5.517	
Smoking		l l	
Yes	17.25	5.233	
Sometimes	8.95	6.090	0.002
I have left	18.36	5.726	0.002
I have never	19.76	5.082	
consumed			

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age, gender, systolic blood pressure, BMI, physical severe activity, heart pain, osteoporosis, joint pain and smoking. Thus, ESR is an important test in these subjects that we can use it for investigation.

DISCUSSION

The results of the present study showed that ESR mean was higher in women than men.

The results of similar study in accordance with the present study has shown that ESR rate is higher in women than men [18].

In the present study, a significant effect of age on ESR was also proved. Some studies have confirmed this in accordance with the present study [19,20].

In current study, there was also a significant relationship between BMI and the ESR average. In different studies, BMI was significantly associated with ESR [18,21-23].

The current study results also did not demonstrate a significant relationship between the history of cancer and the ESR mean. One study found that increased ESR was associated with metastatic disease and worse survival in patients with malignant skin melanoma [24].

CONCLUSION

At present study, there was a significant relationship between the ESR mean and

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