EUDAEMONIC WELLBEING AND C-REACTIVE PROTEIN

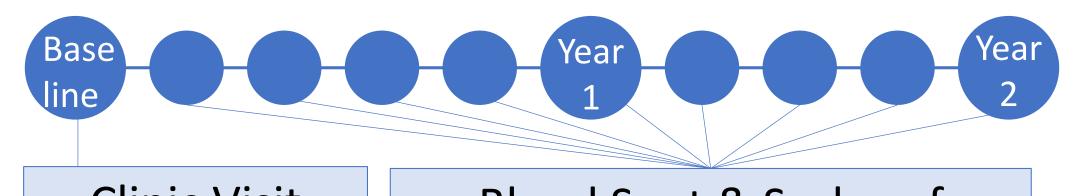
Presenter: Stephanie Judge

Introduction

Prior research suggests higher levels of wellbeing are associated with lower levels of inflammatory markers. This study tested between- and within-person associations between eudaemonic wellbeing and CRP.

Method

Older women (N=200) participating in the Daily
Activity and Health in the Lives of Adult Women
(DAHLiA) study completed a baseline clinic visit
followed by 9 week-long bursts during which they
provided blood samples and completed the Scales of
Psychological Wellbeing



Clinic Visit Blood Draw Blood Spot & Scales of Psychological Wellbeing

Multilevel Model Data Analysis

Level 1: Within-person variation $CRP_{ij} = \beta_{0j} + \beta_{1j}(EWB_{wave}) + r_{ij}$

Level 2: Between-person variation

$$\beta_{0j} = \gamma_{00} + \gamma_{01}(EWB_{person}) + u_{0j}$$

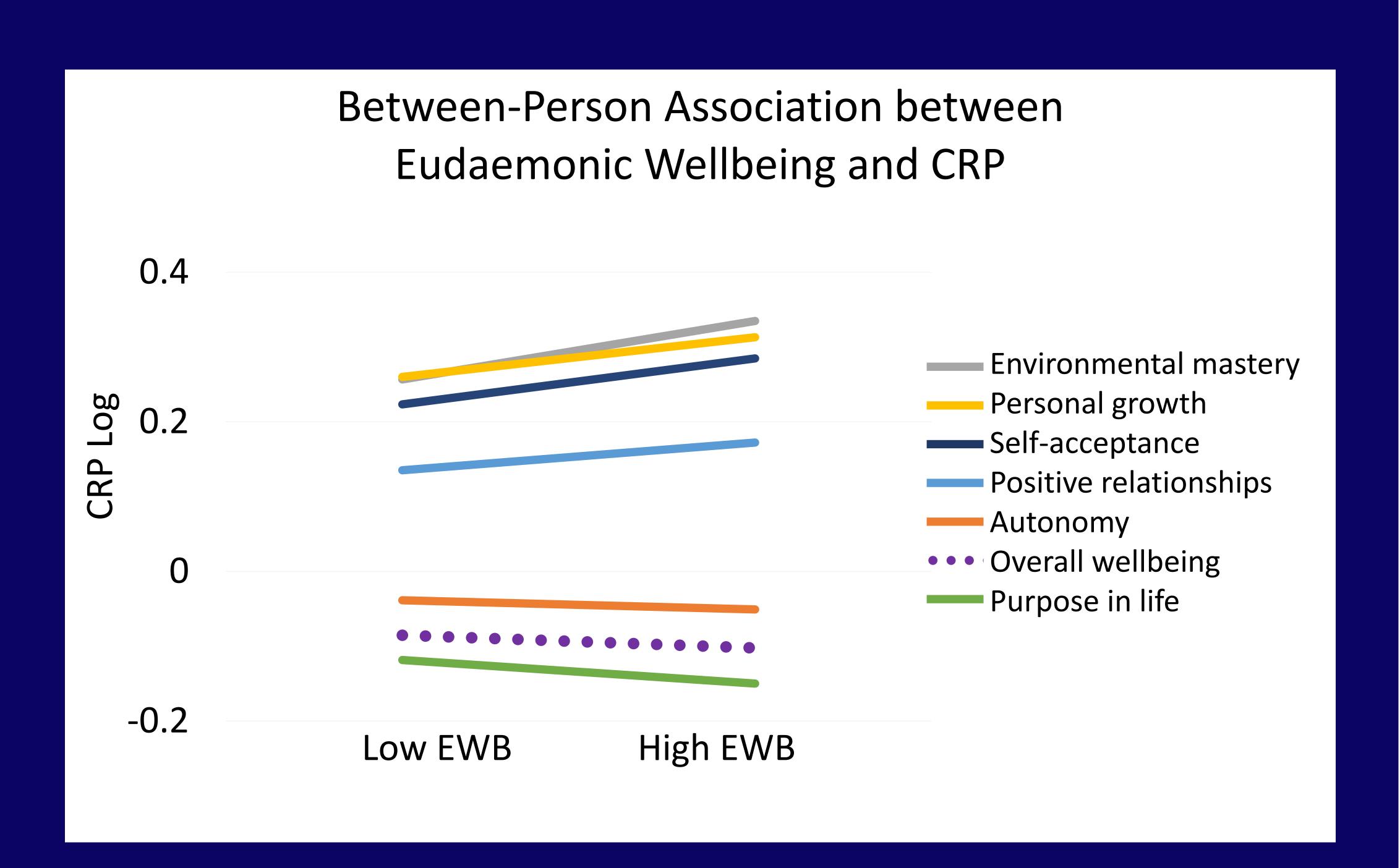
 $\beta_{1i} = \gamma_{10} + u_{1i}$

Results

The results suggest no statistically significant main effect or interactions for wellbeing and CRP, including overall wellbeing and each subscale, at the between- or within-person levels.

Between-Person Effects	γ	SE	p
Overall	-0.01804	0.05773	0.755
Autonomy	-0.00899	0.04343	0.836
Environmental Mastery	-0.04634	0.04119	0.262
Personal Growth	-0.00665	0.06011	0.912
Positive Relationships	0.03462	0.04522	0.445
Purpose in Life	-0.01865	0.04781	0.697
Self-Acceptance	-0.01705	0.04590	0.711

We found no association between eudaemonic wellbeing and C-reactive protein (CRP).



A growing body of research challenges prior results suggesting an association between wellbeing and inflammation.

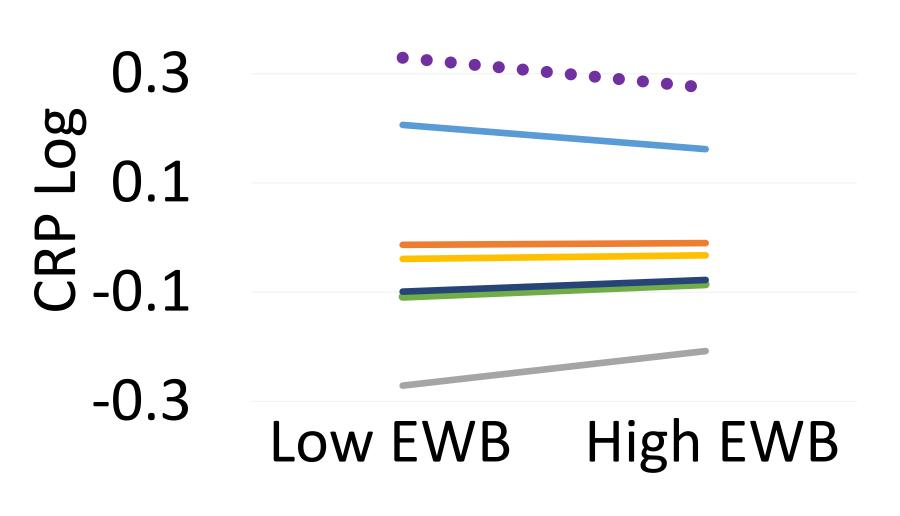
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Within-Person Association between Eudaemonic Wellbeing and CRP



Within-Person Effects	γ	SE	p
Overall	0.05805	0.05148	0.260
Autonomy	-0.00235	0.02816	0.933
Environmental Mastery	0.05723	0.03249	0.079
Personal Growth	0.05337	0.03809	0.162
Positive Relationships	0.02891	0.03521	0.412
Purpose in Life	-0.02581	0.03356	0.442
Self-Acceptance	0.04909	0.03405	0.150

Discussion

Discrepant results may be a function of assessing different constructs (hedonic vs eudaemonic wellbeing) or caused by variation in biomarker measurement techniques.

Stephanie T. Judge, MS
Glenn Fister, BS
Elana M. Gloger, MS
Suzanne C. Segerstrom, PhD, MPH
University of
Kentucky

@EG_healthpsych
@suzannecarrie

stephanie.judge@uky.edu

Leslie J. Crofford, MD

VANDERBILT UNIVERSITY

MEDICAL CENTER