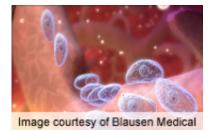


Coronary artery calcium predicts cardio death in T2DM

18 January 2013



In addition to traditional cardiovascular disease risk factors, in patients with type 2 diabetes, coronary artery calcium predicts the risk of cardiovascular death, according to a study published online Dec. 10 in *Diabetes Care*.

(HealthDay)—In addition to traditional cardiovascular disease risk factors, in patients with type 2 diabetes, coronary artery calcium (CAC) predicts the risk of cardiovascular death, according to a study published online Dec. 10 in *Diabetes Care*.

Subhashish Agarwal, M.D., from the Oakwood Hospital and Medical Center in Dearborn, Mich., and colleagues examined whether CAC (based on baseline computed tomography scans) predicted mortality from cardiovascular disease after adjusting for Framingham Risk Score in 1,123 patients (aged 34 to 86 years) with type 2 diabetes mellitus.

During an average follow-up of 7.4 years, the researchers found that 8 percent of patients died of cardiovascular causes. Cardiovascular mortality increased with increasing CAC: using CAC 0 to 9 as the reference group, the odds ratio increased from 2.93 for CAC 10 to 99 to 11.23 for CAC ?1,000. The area under the curve was improved by the addition of CAC and was 0.70 for the Framingham risk score without CAC and 0.75 with CAC. Net reclassification improvement with the addition of CAC was 0.13.

"In type 2 diabetes mellitus, CAC predicts cardiovascular disease mortality and meaningfully reclassifies participants, suggesting clinical utility as a <u>risk stratification</u> tool in a population already at increased <u>cardiovascular disease risk</u>," Agarwal and colleagues conclude.

More information: <u>Abstract</u> <u>Full Text (subscription or payment may be required)</u>

Copyright © 2012 HealthDay. All rights reserved.



APA citation: Coronary artery calcium predicts cardio death in T2DM (2013, January 18) retrieved 4 May 2021 from <u>https://medicalxpress.com/news/2013-01-coronary-artery-calcium-cardio-death.html</u>

This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.