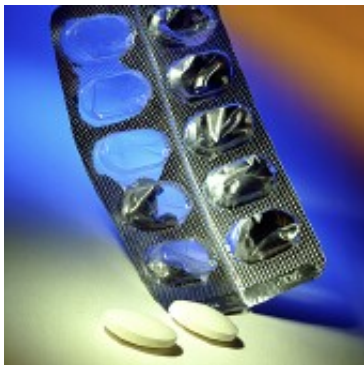


DPP-4 inhibitors not tied to pneumonia hospitalizations

6 April 2015



"Additional research is needed to assess the association between these drugs and other serious infections," the authors write.

More information: [Abstract](#)
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(HealthDay)—The use of dipeptidyl peptidase-4 (DPP-4) inhibitors is not associated with an increased risk of hospitalization for community-acquired pneumonia, according to a study published in the April issue of *Diabetes, Obesity and Metabolism*.

Jean-Luc Faillie, M.D., from Jewish General Hospital in Montreal, and colleagues utilized data from the U.K. Clinical Practice Research Datalink and the Hospital Episodes Statistics database to identify new users of antidiabetic drugs between 2007 and 2012. Comparisons were made between cases hospitalized for incident community-acquired [pneumonia](#) and up to 20 controls who were matched for age, duration of treated diabetes, calendar year, and duration of follow-up.

The researchers found that of the 49,653 patients included in the cohort, 562 were hospitalized for community-acquired pneumonia during follow-up (incidence rate 5.2/1,000 person-years). Current use of DPP-4 inhibitors was not associated with an increased risk of hospitalized community-acquired pneumonia overall (adjusted OR, 0.80; 95 percent confidence interval, 0.50 to 1.29) or according to duration of use (P for trend = 0.57), compared with current use of two or more oral antidiabetic drugs.

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