

Modest relation between HbA1c, cardiovascular events

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without vascular disease (HR, 1.13; 95 percent CI, 0.97 to 1.31).

"In patients with type 2 diabetes, there is a modest, but not statistically significant, relation between HbA1c level and [cardiovascular events](#), and, as there was no statistically significant interaction, this relation was not different for patients with or without clinical manifestation of vascular disease," the authors conclude.

More information: [Abstract](#)

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(HealthDay)—For patients with type 2 diabetes, hemoglobin A1c (HbA1c) is not significantly associated with cardiovascular events, regardless of clinical manifestation of vascular disease, according to a study published online Aug. 25 in *Diabetes Care*.

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Guido Kranenburg, from the University Medical Center Utrecht in the Netherlands, and colleagues examined the correlation between glycemic control and new cardiovascular events and mortality in 1,687 [patients](#) with type 2 [diabetes](#), with and without cardiovascular disease, who were followed for a median of 6.1 years.

The researchers found that the hazard ratio (HR) of the correlation between HbA1c level and cardiovascular events was 1.06 in all patients (95 percent confidence interval [CI], 0.97 to 1.17). There was an increased risk of a cardiovascular event in association with a 1 percent higher HbA1c level for patients with type 2 diabetes without vascular disease (HR, 1.27; 95 percent CI, 1.06 to 1.51), but not in those with vascular disease (HR, 1.03; 95 percent CI, 0.93 to 1.15) (P for interaction = 0.195). Patients with vascular disease had an increased risk of death with a 1 percent higher HbA1c level (HR, 1.16; 95 percent CI, 1.06 to 1.28); the risk was not significant for patients

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