

Preadmission SSRI use ups stroke mortality in diabetes

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mortality was 23.3 percent among current SSRI users (17.1 percent for ischemic stroke, 50.7 percent for intracerebral hemorrhage, and 28.6 percent for subarachnoid hemorrhage). Compared with nonuse, current SSRI use correlated with increased 30-day stroke mortality (adjusted mortality rate ratio [MRR], 1.3), with the highest risk for new users (MMR, 1.5). Increased mortality due to ischemic stroke was the driver behind overall [stroke mortality](#), with adjusted MRRs of 1.3 and 1.7 for current and new users, respectively.

"In [patients](#) with diabetes, preadmission SSRI use was associated with increased mortality following ischemic stroke, compared with nonuse," the authors write.

Various companies, including Novo Nordisk, provided research grants to Aarhus University.

More information: [Abstract](#)

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(HealthDay)—For patients with diabetes, preadmission selective serotonin reuptake inhibitor (SSRI) use is associated with increased risk of stroke mortality, according to a study published online May 3 in the *Journal of Internal Medicine*.

Morten Würtz, M.D., Ph.D., from Aarhus University Hospital in Denmark, and colleagues examined the correlation between preadmission SSRI use and mortality in patients with diabetes who were hospitalized due to stroke. Patients with diabetes from Denmark with first-time stroke-related hospitalizations and subsequent mortality were identified from population-based medical databases (12,620 patients). SSRI use was categorized as current, former, or nonuse based on redeemed prescriptions.

The researchers found that 30-day stroke mortality was 15.8 percent among SSRI nonusers (10.4 percent for [ischemic stroke](#), 41.8 percent for intracerebral stroke, and 27.3 percent for [subarachnoid hemorrhage](#)). Thirty-day stroke-

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