

Newly diagnosed diabetes increases risk of heart attack, stroke even among statin users

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Postmenopausal women with newly diagnosed diabetes have a significantly increased risk of atherosclerotic cardiovascular disease whether or not they take statin drugs, according to the results of a new study led by researchers at UMass Medical School and published in the *European Journal of Epidemiology*.

Statin therapy decreases atherosclerotic cardiovascular disease events, which includes heart attack, coronary heart disease deaths and stroke in people with and without existing <u>diabetes</u>. However, <u>statin</u> use also increases risk of new-onset diabetes. In this study, researchers hypothesized that new clinical diabetes related to statin use may be milder on atherosclerotic <u>cardiovascular disease</u>.

"Our findings did not support this hypothesis, as we discovered that statin-related diabetes is no different from diabetes developed outside statin use in its significant impact on atherosclerotic cardiovascular disease "said Yunsheng Ma, MD, PhD, MPH, associate professor of medicine and corresponding author of the study. "The results underscore the importance of prevention, monitoring and detection of diabetes among post-menopausal women, including those who take statin medication."

Given the increasing prevalence of diabetes among older adults and the projected growth of this patient population, researchers sought to compare the impact of newly diagnosed diabetes on atherosclerotic <u>cardiovascular disease risk</u> for patients according to whether they used



statins. Using data from the National Institutes of Health's Women's Health Initiative, researchers examined the health histories of more than 120,000 postmenopausal women who had neither diabetes nor cardiovascular disease at the start of the 15-year study period. Participants' statin use was determined at enrollment and during the course of the study, as were atherosclerotic cardiovascular disease events, such as heart attack and stroke after diabetes diagnosis.

For those not on statins at the time of diabetes diagnosis, there was a 42 percent increased risk of atherosclerotic cardiovascular disease among women with newly diagnosed diabetes versus those without diabetes. Among women on statins, there was a 39 percent increased risk of cardiovascular disease in women with new onset diabetes vs. those without diabetes. The increased atherosclerotic cardiovascular disease was similar between women with new diabetes before or after initiating statins.

JoAnn E. Manson, MD, a co-author on the study and professor at Harvard Medical School and Brigham and Women's Hospital, agreed that diabetes is a concern but cautioned that clinicians and patients should not shy away from statin use due to the diabetes findings. "Statin medications are extremely effective in reducing risks of heart attacks and strokes and, in appropriate candidates for treatment, have a net favorable effect whether or not diabetes is present," she said.

More information: Yunsheng Ma et al. Impact of incident diabetes on atherosclerotic cardiovascular disease according to statin use history among postmenopausal women, *European Journal of Epidemiology* (2016). DOI: 10.1007/s10654-016-0153-7

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