

Increased risk of diabetes with nonfunctional adrenal tumors

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(HealthDay)—Patients with nonfunctional adrenal tumors (NFATs) have

increased risk of diabetes compared to those without adrenal tumors, according to a study published online Aug. 2 in the *Annals of Internal Medicine*.

In a [cohort study](#), Diana Lopez, M.D., from Brigham and Women's Hospital in Boston, and colleagues examined the hypothesis that presence of NFATs increases the risk for cardiometabolic outcomes. Data were included from 166 participants with benign NFATs and 740 with no adrenal tumor, all with at least three years of follow-up. Medical records were reviewed for the development of incident outcomes (hypertension, composite diabetes [prediabetes or type 2 diabetes], hyperlipidemia, cardiovascular events, and [chronic kidney disease](#)) during a mean follow-up of 7.7 years.

The researchers found that the risk of incident composite diabetes was significantly higher for patients with NFATs versus those without [adrenal tumors](#) (27.3 versus 11.7 percent; adjusted risk ratio, 1.87). There were no significant correlations between NFATs and other outcomes. There was a correlation for higher "normal" postdexamethasone cortisol levels (≤ 50 nmol/L) with larger NFAT size and higher prevalence of type 2 diabetes.

"These results should prompt a reassessment of whether the classification of benign adrenal tumors as 'nonfunctional' adequately reflects the continuum of hormone secretion and metabolic risk they may harbor," the authors write.

One author disclosed financial ties to the biopharmaceutical industry.

More information: [Full Text \(subscription or payment may be required\)](#)

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