

Severe hypoglycemia rates have equilibrated for DCCT groups

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powerful predictor of severe hypoglycemia was a preceding episode of severe hypoglycemia. The risk of severe hypoglycemia was increased with entry into the DCCT study as an adolescent, while lower risk was seen for insulin pump use. There were similar increases in severe hypoglycemia rates with lower HbA1c among the treatment groups.

"Severe hypoglycemia persists and remains a challenge for patients with type 1 diabetes across their life span," the authors write.

Free or discounted supplies or equipment were provided by several pharmaceutical and medical device companies.

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(HealthDay)—Rates of severe hypoglycemia have equilibrated between the two Diabetes Control and Complications Trial (DCCT)/Epidemiology of Diabetes Interventions and Complications (EDIC) treatment groups in association with duration of diabetes and HbA1c level, according to a study published online May 26 in *Diabetes Care*.

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Rose A Gubitosi-Klug, M.D., Ph.D., from Case Western Reserve University in Cleveland, and colleagues examined the rates of [severe hypoglycemia](#) in the DCCT/EDIC cohort after about 30 years of follow-up.

The researchers found that about one-half of the cohort reported episodes of severe hypoglycemia. The rates of severe hypoglycemia decreased in the former DCCT intensive treatment group during EDIC, while they increased in the former conventional treatment group, resulting in similar rates (36.6 versus 40.8 episodes per 100 patient-years, respectively; relative risk, 1.12 [95 percent confidence interval, 0.91 to 1.37]). The most

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