

Intensive BP goals reduce risk of cardiovascular events

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and cardiovascular death was 0.82 ($P = 0.0017$). There was a nonsignificant interaction between intensive blood pressure lowering and type 2 diabetes ($P = 0.13$). While the 10-year cardiovascular risk was higher in patients with type 2 diabetes, there was no interaction between the risk and treatment effect ($P = 0.84$).

"Intensive [blood pressure](#) lowering may have a similar favorable effect and appears to decrease [cardiovascular events](#) in both patients with and patients without type 2 diabetes mellitus," the authors write.

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(HealthDay)—Intensive blood pressure lowering may similarly decrease cardiovascular events in both patients with and patients without type 2 diabetes mellitus, according to a study published online Dec. 6 in *Diabetes Care*.

Tom F. Brouwer, M.D., from the University of Amsterdam, and colleagues assessed the effect of both type 2 diabetes and baseline cardiovascular disease risk on the treatment effect of intensive blood pressure lowering based on data and pooled analysis from two randomized trials (ACCORD-BP [Action to Control Cardiovascular Risk in Diabetes Blood Pressure] and SPRINT [Systolic Blood Pressure Intervention Trial] studies; total of 14,094 patients).

The researchers found that the mean baseline [systolic blood pressure](#) was 139.5 mm Hg for the cohort and just over one-third (33.6 percent) had type 2 diabetes. The hazard ratio for the primary composite end point of unstable angina, myocardial infarction, acute heart failure, stroke,

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