

# Intensive BP therapy in diabetes may lower risk for CV events

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significantly favored intensive BP treatment versus unweighted results (hazard ratio for primary outcome in intensive versus standard treatment in weighted analyses, 0.67, 95 percent confidence interval, 0.49 to 0.91; hazard ratio for unweighted analyses, 0.88, 95 percent confidence interval, 0.73 to 1.07). The weighted results over five years estimated 34 as the number needed to treat to avoid one cardiovascular event and 55 as the number needed to harm.

"These findings favor intensive BP treatment, but also highlight the lack of data support for BP [treatment](#) guidance in large segments of the U.S. adult population with diabetes mellitus particularly racial/ethnic minorities and those with lower cardiovascular risk," the authors write.

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(HealthDay)—Intensive blood pressure (BP) therapy is associated with significantly lower risk for cardiovascular events based on data reweighted to better reflect the U.S. adult population with diabetes, according to a study published in the Sept. 11 issue of the *Journal of the American College of Cardiology*.

Seth A. Berkowitz, M.D., from the University of North Carolina at Chapel Hill, and colleagues reweighted individual patient data from the Action to Control Cardiovascular Risk in Diabetes BP trial (4,507 patients) to better represent the demographic and clinical risk factors of adults with [diabetes](#) in the United States. Data were also included from the National Health and Nutrition Examination Survey from 2005 to 2014 (1,943 patients with diabetes). The objective was to estimate how results from the largest clinical trial of intensive BP treatment among [adults](#) with diabetes would generalize to the U.S. population.

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The researchers found that weighted results

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