

Study questions certain treatments for diabetic patients at high risk for heart disease

25 October 2018

What are the long-term kidney effects of aggressive control of glycemia, blood pressure and lipids?

CJASN
Clinical Journal of American Society of Nephrology

Cohort and Methods	Findings		
<p>ACCORD Type 2 DM and high risk for CV disease n=10,251</p> <p>↓</p> <p>ACCORDION (Extension phase of ACCORD)</p> <p>Post-randomization surveillance of kidney outcomes N=10,139</p> <p>Mean follow-up 7.7 years</p>	n=3,410	n=988	n=954
	Composite kidney outcome HR (95% CI)	Macroalbuminuria HR (95% CI)	Doubling of SCr HR (95% CI)
Intensive Glycemic Control	0.92 (0.86-0.98)	0.68 (0.59-0.77)	NS
Blood Pressure Control	1.16 (1.05-1.28)	NS	1.64 (1.30-2.06)
Fenofibrate Use	1.16 (1.06-1.27)	NS	2.00 (1.61-2.49)

Conclusions: In people with type 2 diabetes at high risk for cardiovascular disease, intensive glycemic control may result in a long-term reduction in macroalbuminuria. However, intensive BP control and fenofibrate may increase the risk for adverse kidney events.

Amy Mottl, John Buse, Faramarz Ismail-Begli, Ronald Sigal, Carolyn Pechley, Vasilios Papadimitriou, Debra Simmons, Lois Katz, Josef Michalek, Timothy Craven. Long-Term Effects of Intensive Glycemic and Blood Pressure Control and Fenofibrate Use on Kidney Outcomes. CJASN doi: 10.2215/CJN.06200818

people with type 2 diabetes at high risk for [cardiovascular disease](#).

The team found that intensive blood sugar control aiming for normal average [blood sugar](#) (hemoglobin A1c target

Credit: Mottl

New research suggests that attempts to normalize blood pressure, and cholesterol may have negative long-term effects on kidney health in adults with type 2 diabetes who are at high risk for cardiovascular disease. The results appear in an upcoming issue of the *Clinical Journal of the American Society of Nephrology* (CJASN) and will be presented at ASN Kidney Week 2018.

Type 2 diabetes greatly increases the risk for both cardiovascular disease and [chronic kidney disease](#). Therefore, it is especially important to protect the heart and kidney health of patients with type 2 diabetes. In these patients, aggressive control of [blood](#) sugar, blood pressure, and cholesterol has resulted in conflicting short-term effects on kidney health. To determine the long-term kidney effects of these interventions, Amy K. Mottl, MD (University of North Carolina Kidney Center), Timothy E. Craven, MSPH (Wake Forest School of Medicine), and their colleagues examined information on more than 10,000 participants in ACCORDION, which is an extension phase of the ACCORD trial, a multifactorial intervention study in

APA citation: Study questions certain treatments for diabetic patients at high risk for heart disease (2018, October 25) retrieved 30 June 2022 from <https://medicalxpress.com/news/2018-10-treatments-diabetic-patients-high-heart.html>

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