

Atherothrombotic event recurrences in diabetic patients account on the same vascular bed

Implications for secondary prevention

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PURPOSE

The recurrence pattern of atherothrombotic events in diabetics with cardiovascular disease is not well known, although there are data that suggest that the recurrence as acute coronary syndrome is common in patients with a previous stroke.

AIM

The aim of our study is to analyze in a prospective manner the recurrence pattern in diabetics with prior cardiovascular disease.

RESULTS

Age (Mean ±SD)	66 ±11
Female Sex (%)	51.3
Hypertension (%)	64
Dyslipidemia (%)	69.9
Previous Cardiovascular Disease (%)	26
Smoker (%)	13
Obesity (%)	47
Albuminuria (%)	37.3

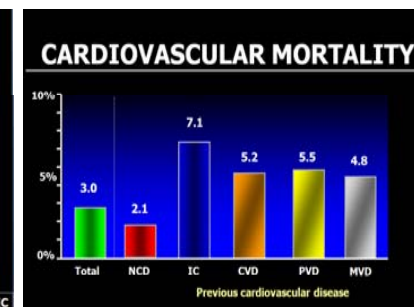
- No Cardiovascular Disease (NCD)
- Ischemic Cardiomyopathy (IC)
- Cerebrovascular Disease (CVD)
- Peripheral Vascular Disease (PVD)
- Multiple Vascular Disease (MVD)

METHODS

Multicenter prospective cohort study involved 1423 consecutive patients with diabetes mellitus who were recruited by 31 primary care physicians. The patients' characteristics were recorded and they were followed up for 45±10 months. We lost 109 patients in the follow up

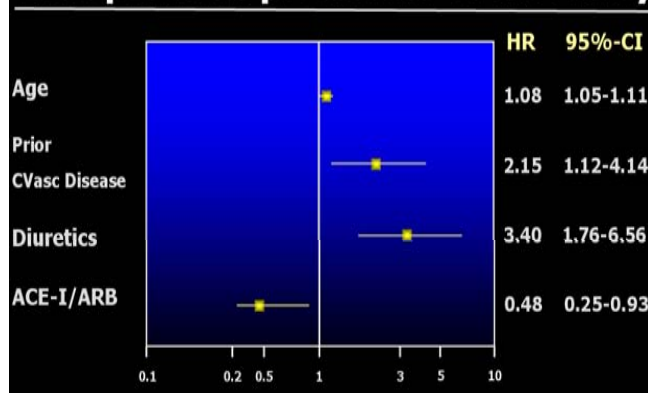
Risk Factor Control							
	Total (1423)	NCD (74%)	IC (9%)	CVD (4%)	PVD (8%)	MVD (5%)	p
AP(<130/80)	14%	13	29	2	15	10	1,5,6
BMI (<25)	12%	12	9	6	13	15	ns
Glucose (<126)	22%	20	28	24	17	31	ns
HbA1c (<7%)	65%	65	66	60	66	68	ns
TCholest (<180)	20%	17	35	16	23	29	1,5
HDLc (>40/50)	61%	63	61	62	48	51	3
LDLc (<100)	15%	13	25	10	18	25	1,4,5
Triglic (<150)	75%	76	77	60	79	65	2,7

1: NCD/IC; 2: NCD/CVD; 3: NCD/PVD; 4: NCD/MVD; 5: IC/CVD; 6: IC/MVD; 7: CVD/PVD

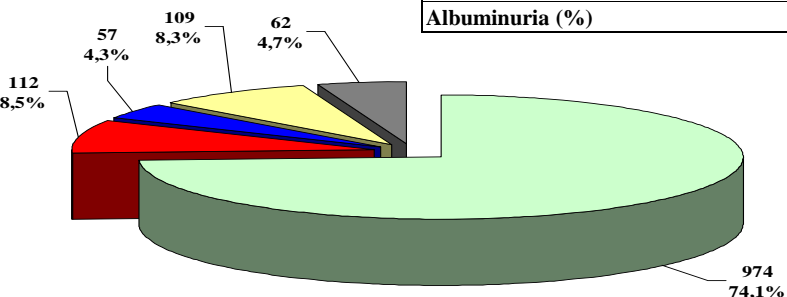
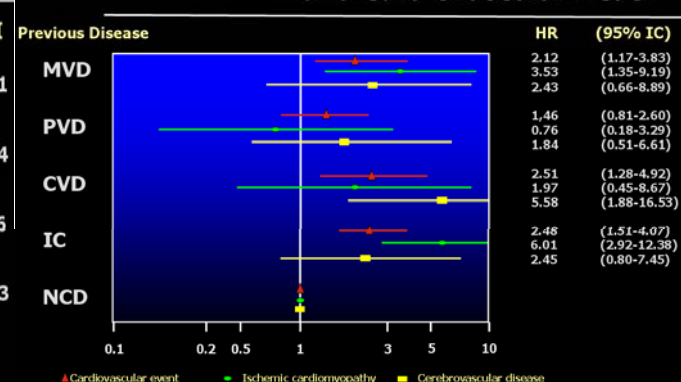


By the end of follow-up, 393 (30%) had been hospitalized, 179 (14%) of whom for cardiovascular disease.

Independent predictors of mortality



Risk of Cardiovascular events and Cardiovascular Death



CONCLUSIONS

The diabetic patients with chronic ischaemic heart disease or cerebrovascular disease have a pattern of recurrence that shows preference over the same vascular bed. These results have implications for the secondary prevention strategy in diabetic patients with prior cardiovascular disease

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