

Rheumatoid arthritis is a risk factor for cardiovascular disease

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The risk of cardiovascular disease (CVD) for people with rheumatoid arthritis (RA) has been found to be comparable to the risk of CVD in people with type 2 diabetes, according to the conclusions of two studies presented today at EULAR 2008, the Annual Congress of the European League Against Rheumatism in Paris, France.

At least one CV-event was reported in 8.6% of the RA population studied, a figure that was double that reported in the general population (4.3%), corresponding with an incidence of 3.14 per 100 patient/years (95% confidence interval (CI): 1.98-4.30) for RA patients, and 1.51 per 100 person/years (95%-CI: 1.18-1.84) for the general population.

In a second study, the age- and gender- adjusted prevalence odds ratios for CVD were found to be 2.3 (95%-CI: 1.3-4.0) for those with type 2 diabetes and 2.0 (95%-CI: 1.1-3.4) for those with RA, indicating a similar CVD risk for the two diseases.

Dr Mike Peters of the VU University Medical Center and Jan van Breemen Institute, Amsterdam, the Netherlands, an investigator in both studies (lead investigator: Dr Michael T Nurmohamed), said, "These two studies suggest that RA should be considered an important cardiovascular disease risk factor. Healthcare professionals treating those with the disease should therefore be aware of this elevated risk and advise their patients to follow a healthy diet and lifestyle and be alert to the early signs and symptoms of CVD in addition to managing their RA."

The studies both examined 353 randomly selected outpatients with RA (from the CARRÉ study) and participants of a population-based cohort study on diabetes and CVD (the Hoorn study).

The first study compared 3-year incident CVD in both the CARRÉ and Hoorn studies, using Cox proportional hazards models. In the second, patients with normal fasting glucose levels from the CARRÉ study (n=294) were compared to individuals from the Hoorn study with a normal glucose metabolism (n=258) and individuals with type 2 diabetes (n=194). Both made adjustments for other CV risk factors, i.e. blood pressure, anti-hypertensive agent use, total cholesterol, statin use, waist to hip ratio and smoking.

Source: European League Against Rheumatism

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