

# High hsCRP may up risk of macular edema in T1DM

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For patients with type 1 diabetes mellitus, elevated levels of high-sensitivity C-reactive protein are associated with an increased risk of clinically significant macular edema and with the development of retinal hard exudates, according to a study published online Feb. 7 in *JAMA Ophthalmology*.

(HealthDay)—For patients with type 1 diabetes mellitus, elevated levels of high-sensitivity C-reactive protein (hsCRP) are associated with an increased risk of clinically significant macular edema (CSME) and with the development of retinal hard exudates, according to a study published online Feb. 7 in *JAMA Ophthalmology*.

In a large multicenter randomized trial (Diabetes Control and Complications Trial [DCCT]), Rajeev H. Muni, M.D., from St. Michael's Hospital and the Hospital for Sick Children in Toronto, and colleagues examined whether baseline hsCRP and intercellular adhesion molecule 1 (ICAM-1) levels predict the development and progression of

[diabetic retinopathy](#), CSME, and retinal hard exudates. The study population included 1,441 subjects with [type 1 diabetes mellitus](#).

After adjustment for randomized treatment assignment and additional variables, the researchers identified an association between hsCRP and the risk of CSME (relative risk, 1.83 for highest versus lowest quintile; 95 percent confidence interval [CI], 0.94 to 3.55) and for the development of retinal hard exudates (relative risk, 1.78 for highest versus lowest quintile; 95 percent CI, 0.98 to 3.25). For ICAM-1, the relative risk of developing retinal hard exudates was 1.50 for the highest versus lowest quintile (95 percent CI, 0.84 to 2.68).

"After adjusting for known risk factors, increasing quintiles of baseline [hsCRP](#) level may be associated with higher risk of incident CSME and macular hard exudate in the DCCT cohort," the authors write.

**More information:** [Abstract](#)  
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