

# No increased cancer risk with glargine versus human insulin

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(HealthDay)—There is no evidence that patients with diabetes who initiate insulin glargine have a higher risk of cancer than similar patients initiating human neutral protamine Hagedorn (NPH) insulin, according to a study published online July 22 in *Diabetes Care*.

Til Stürmer, M.D., Ph.D., from the University of North Carolina at Chapel Hill, and colleagues compared evidence on the long-term effects of glargine versus NPH insulin on the risk of cancer using data from the Inovalon MORE<sup>2</sup> Registry from January 2003 to December 2010. Initiators of glargine and human NPH without an insulin prescription during the prior 19 months were identified, and balanced on risk factors for cancer outcomes based on comorbidities, comedication, and health

care use during the previous 12 months.

The researchers found that more patients initiated glargine than NPH (43,306 and 9,147 patients, respectively). Over 1.2 years of follow-up, 993 initiators of glargine developed cancer, while during 1.1 years of follow-up, 178 of those taking NPH developed cancer, for an overall hazard ratio of 1.12 for glargine initiators (95 percent confidence interval, 0.95 to 1.32). For all types of cancer (breast, prostate, and [colon cancer](#)) and various durations of treatment, as well in all sensitivity analyses, the results were consistent.

"Patients initiating [insulin glargine](#) rather than NPH do not seem to be at an increased risk for cancer," the authors write.

Several authors disclosed [financial ties](#) to pharmaceutical companies, including Sanofi, which funded the study.

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