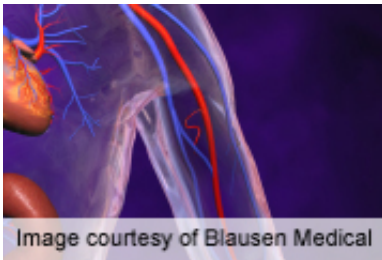


Interarm BP difference may up cardiac risk in diabetes

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(HealthDay)—Interarm differences in systolic blood pressure (BP) in patients with diabetes may be associated with an increased risk of cardiovascular morbidity and mortality, according to research published online on March 25 in *Diabetes Care*.

Christopher E. Clark, Ph.D., of the University of Exeter in the United Kingdom, and colleagues analyzed data from a prospective cohort of 727 patients with type 1 or type 2 diabetes and 285 controls without diabetes. The authors sought to assess the association between interarm differences in BP and risk of [cardiovascular morbidity](#) and mortality.

The researchers found that interarm differences of 10 mm Hg or greater in systolic BP in patients with diabetes were associated with increased risk of [peripheral arterial disease](#) (odds ratio [OR], 3.4; 95 percent confidence interval [CI], 1.2 to 9.3). Interarm differences of 15 mm Hg

or greater in systolic BP in patients with diabetes were associated with increased risk of diabetic retinopathy (OR, 5.7; 95 percent CI, 1.5 to 21.6) and chronic kidney disease (OR, 7.0; 95 percent CI, 1.7 to 29.8). Interarm differences in systolic BP were associated prospectively with increased risk of cardiovascular mortality (hazard ratios: 10 mm Hg or greater, 3.5 [95 percent CI, 1.0 to 13.0] and 15 mm Hg or greater, 9.0 [95 percent CI, 2.0 to 41.0]).

"In the population with [diabetes](#), systolic differences may be associated with an increased risk of morbidity and mortality," the authors write.

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