

Long-term post-CABG mortality increased with diabetes

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(HealthDay)—Patients with type 1 diabetes mellitus (T1DM) and type 2 diabetes mellitus (T2DM) have increased long-term risk of death after coronary artery bypass grafting (CABG), with higher risk among those with T1DM, according to a study published in the April 28 issue of the *Journal of the American College of Cardiology*.

Martin J. Holzmann, M.D., Ph.D., from the Karolinska University Hospital in Stockholm, and colleagues examined long-term survival in patients with T1DM and T2DM who underwent primary isolated CABG. Data were included for 39,235 patients who underwent primary isolated CABG in Sweden, of whom 1.8 percent had T1DM and 21 percent had T2DM.

The researchers found that patients with T1DM were younger, had



reduced kidney function, and had more often had peripheral vascular disease compared to those with T2DM or no diabetes. Seventeen percent of patients died during a mean follow-up of 5.9 years. Among patients with T1DM and T2DM, 21 and 19 percent died, respectively. Compared to patients without diabetes, the adjusted hazard ratios for death in patients with T1DM and T2DM were 2.04 (95 percent confidence interval, 1.72 to 2.42) and 1.11 (95 percent confidence interval, 1.05 to 1.18), respectively.

"Patients with T1DM had more than double the long-term risk of death after CABG compared with patients without diabetes," the authors write. "The long-term risk of death in patients with T2DM was only slightly increased."

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