

Periodontal disease predicts CAC progression in type 1 diabetes

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(HealthDay)—In patients with type 1 diabetes, but not those without diabetes, periodontal disease duration is an independent predictor of long-term progression of coronary artery calcium (CAC), according to a study published in the Sept. 15 issue of *The American Journal of Cardiology*.

Daniel W. Groves, M.D., from the University of Colorado-Denver in Aurora, and colleagues examined the interrelation between periodontal disease and CAC progression in individuals with and without type 1 diabetes. The prevalence and progression of CAC was assessed in relation to self-reported periodontal disease. During a mean of 6.1 years, 473 patients with type 1 diabetes and 548 without diabetes were followed.

The researchers observed no difference in the prevalence and duration of periodontal disease at baseline for subjects with versus without

diabetes (14.5 versus 13.4 percent; $P = 0.60$; six versus nine years; $P = 0.18$). There was no significant association observed between duration of periodontal disease and baseline CAC prevalence. Periodontal disease duration was significantly related to CAC progression in patients with type 1 diabetes ($P = 0.004$), but not in those without diabetes ($P = 0.63$).

"In conclusion, this study suggests that [periodontal disease](#) is an [independent predictor](#) of long-term progression of CAC in patients with type 1 [diabetes](#)," the authors write.

More information: [Abstract](#)
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