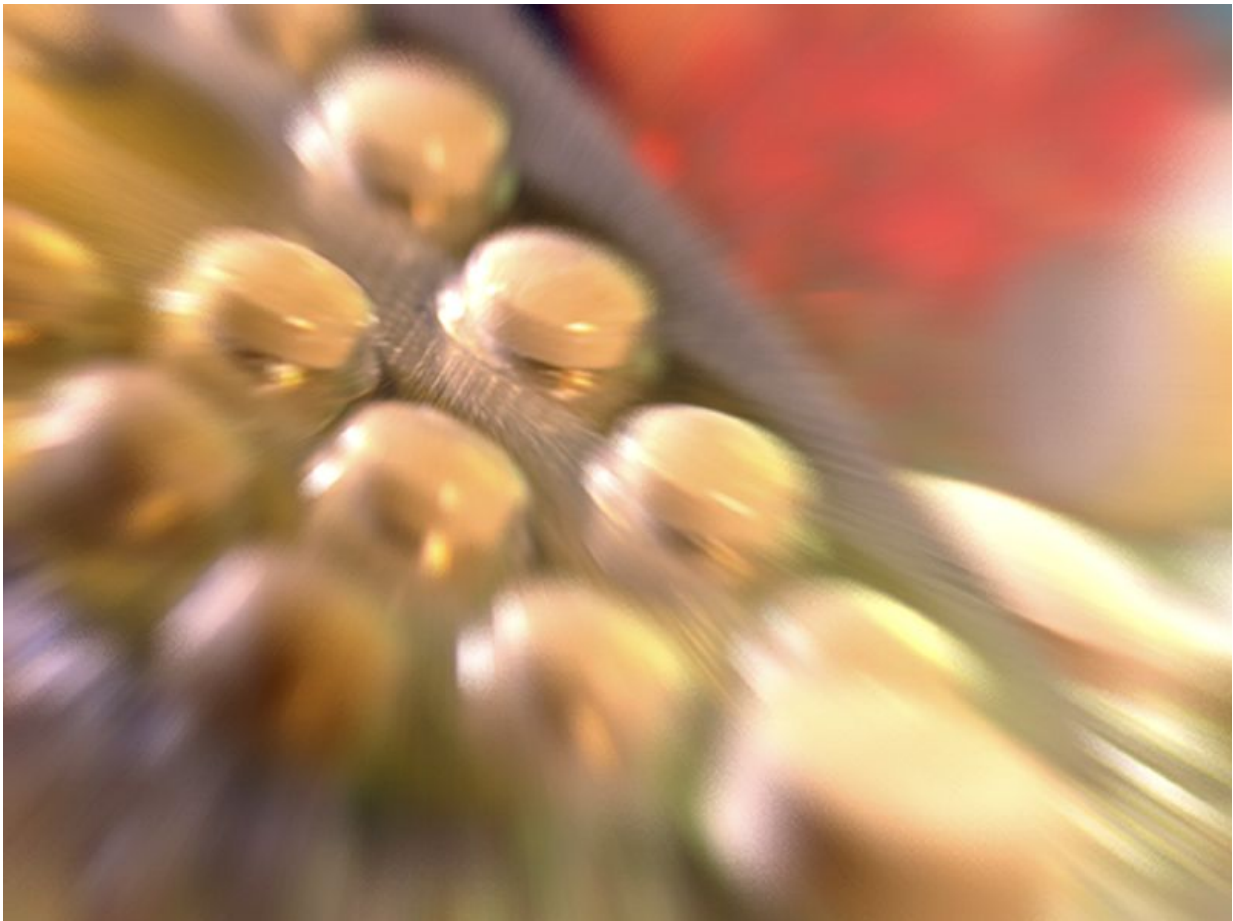


Saxagliptin, sitagliptin don't up hospitalized heart failure

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(HealthDay)—Use of saxagliptin or sitagliptin is not associated with

increased risk of hospitalized heart failure (hHF) compared with other antihyperglycemic agents, according to a study published online April 26 in the *Annals of Internal Medicine*.

Sengwee Toh, Sc.D., from Harvard Medical School and the Harvard Pilgrim Health Care Institute in Boston, and colleagues examined the correlations of hHF with saxagliptin and sitagliptin in a retrospective new-user [cohort study](#). Data were included for 18 health insurance and health system data partners in the U.S. Food and Drug Administration's Mini-Sentinel program (78,553 saxagliptin users and 298,124 sitagliptin users).

The researchers found that the risk for hHF was not higher for dipeptidyl peptidase-4 inhibitors versus other drugs. From the disease risk score (DRS)-stratified analyses, the hazard ratios were 0.83, 0.63, 0.69, and 0.61 for saxagliptin versus sitagliptin, pioglitazone, sulfonylureas, and insulin, respectively. In the DRS-stratified analyses, the hazard ratios were 0.74, 0.86, and 0.71 for sitagliptin versus pioglitazone, sulfonylureas, and insulin, respectively. Similar results were seen from the 1:1 propensity score-matched analyses, in subgroup analyses of patients with and without prior cardiovascular disease, and in a subgroup defined by the two highest DRS deciles.

"In this large cohort study, a higher risk for hHF was not observed in users of saxagliptin or sitagliptin compared with other selected antihyperglycemic agents," the authors write.

One author disclosed financial ties to Novartis Pharmaceuticals.

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