

Women with GDM have elevated risk of future cardiac events

November 11 2016



(HealthDay)—The risk of cardiovascular outcomes is elevated for

women with gestational diabetes mellitus (GDM), even in the absence of subsequent type 2 diabetes mellitus (T2DM), according to a study published online Nov. 7 in *Diabetes Care*.

Ravi Retnakaran, M.D., from Mount Sinai University in Toronto, and Baiju R. Shah, M.D., Ph.D., from the University of Toronto, examined the role of T2DM in determining vascular outcomes in women with previous GDM. Women with a live-birth pregnancy between April 1994 and March 2014 were stratified into four groups: women with GDM in whom T2DM developed (15,585 women); women with GDM in whom T2DM did not develop (41,299 women); women without GDM in whom T2DM developed (49,397 women); and women with neither GDM nor T2DM (1,408,798 women). Participants were followed for a median of 10.0 years.

The researchers found that among women with GDM, those in whom T2DM developed had elevated risks of vitrectomy/photocoagulation, renal dialysis, and hospitalization for foot infection (hazard ratios, 4.49, 7.52, and 4.32, respectively; all *P* coronary artery disease were increased for both [women](#) with GDM in whom T2DM developed and in those in whom T2DM did not develop.

"Future macrovascular risk is an inherent feature of GDM, irrespective of subsequent T2DM," the authors write.

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Citation: Women with GDM have elevated risk of future cardiac events (2016, November 11) retrieved 4 May 2024 from

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