

Studies often fail to include info on T2DM medication adherence

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(HealthDay)—Studies often fail to include information on outcomes by

medication adherence in type 2 diabetes, according to research published online Aug. 11 in *Diabetes Care*.

Kamlesh Khunti, M.D., Ph.D., from Leicester General Hospital in the United Kingdom, and colleagues examined the correlation between [medication adherence](#) and risk of [cardiovascular disease](#) (CVD), all-cause mortality, and hospitalization in type 2 diabetes. Eligible studies were reviewed and data extracted; a random-effects meta-analysis was used to calculate pooled relative risks (RRs). Data were included for eight observational studies with 318,125 adults.

The researchers found that the mean rate of poor adherence was 37.8 percent. Five studies only provided adjusted estimates. The RRs of good versus poor adherence to medication were 0.72 and 0.90 for all-cause mortality and hospitalization, respectively. There was no evidence of small-study bias. CVD outcomes were reported by adherence in only one study.

"Pooled estimates from available [observational studies](#) suggest that good medication adherence is associated with reduced risk of all-cause mortality and hospitalization in people with type 2 diabetes, although bias cannot be excluded as an explanation for these findings," the authors write.

Several authors disclosed financial ties to the pharmaceutical industry.

More information: [Abstract/Full Text \(subscription or payment may be required\)](#)

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