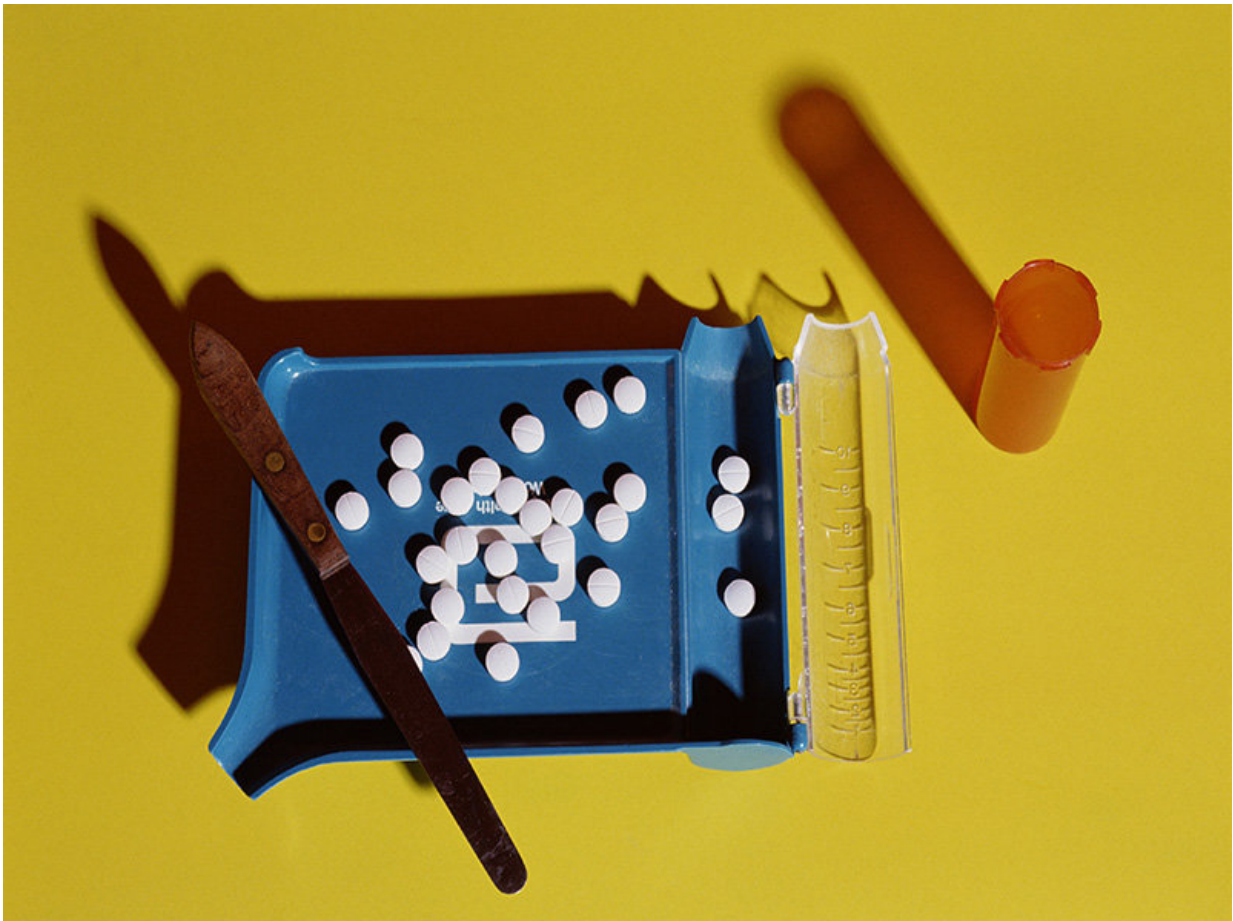


# Higher $\beta$ -blocker dose linked to lower mortality risk

November 21 2017

---



(HealthDay)—An increased  $\beta$ -blocker dose is associated with a greater

prognostic advantage in patients with chronic heart failure (CHF) and diabetes than in those with CHF but no diabetes, according to a study published online Oct. 25 in *Diabetes Care*.

Klaus K. Witte, M.D., from the University of Leeds in the United Kingdom, and colleagues assessed the impact of  $\beta$ -blockers and angiotensin-converting enzyme inhibitors (ACEIs) on mortality in CHF patients with and without [diabetes](#) in a [prospective cohort study](#). They recruited 1,797 patients with CHF from 2006 to 2014, and mean follow-up was four years.

The researchers found that patients with diabetes were prescribed larger doses of  $\beta$ -blockers and ACEIs compared to patients without diabetes. Lower mortality was seen with increasing  $\beta$ -blocker dose in both patients with diabetes (8.9 percent per mg/day) and without diabetes (3.5 percent per mg/day), although the effect was greater in people with diabetes (interaction  $P = 0.027$ ). Similarly, increasing ACEI dose was associated with lower mortality in both patients with diabetes (5.9 percent per mg/day) and without diabetes (5.1 percent per mg/day), with similar effect size in the groups (interaction  $P = 0.76$ ).

"Increasing  $\beta$ -blocker dose is associated with a greater prognostic advantage in CHF patients with diabetes than without diabetes," the authors write.

Two authors disclosed financial ties to the pharmaceutical and medical device industries.

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

Copyright © 2017 [HealthDay](#). All rights reserved.

Citation: Higher  $\beta$ -blocker dose linked to lower mortality risk (2017, November 21) retrieved 26 April 2024 from

<https://medicalxpress.com/news/2017-11-higher-blocker-dose-linked-mortality.html>

This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.