

CVD risk up with beta-2-agonist, antimuscarinic antagonist start

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(HealthDay)—For patients with chronic obstructive pulmonary disease



(COPD), new initiation of inhaled long-acting β_2 -agonists (LABAs) and long-acting antimuscarinic antagonists (LAMAs) is associated with increased risk of cardiovascular disease (CVD), according to a study published online Jan. 2 in *JAMA Internal Medicine*.

Meng-Ting Wang, Ph.D., from the National Defense Medical Center in Taipei, Taiwan, and colleagues conducted a nested case-control study involving LABA-LAMA-naive <u>patients</u> with COPD who were aged 40 years or older to examine the risk of CVD associated with LABAs and LAMAs. Data were included for 37,719 patients with CVD and 146,139 matched controls over a mean follow-up of two years.

The researchers found that in patients with COPD, new LABA and LAMA use was associated with a 1.5- and 1.52-fold increased cardiovascular risk within 30 days of initiation, respectively; with prevalent use, the risk was absent or reduced. CVD risk did not differ with individual LABA agents, LAMA dosage forms, and concomitant COPD regimens. In an alternative case-crossover study the risk persisted, and it remained across subgroups without history of CVD or prior exacerbations.

"New initiation of LABAs or LAMAs in patients with COPD is associated with an approximate 1.5-fold increased severe cardiovascular risk, irrespective of prior CVD status and history of exacerbations," the authors write.

More information: <u>Abstract/Full Text (subscription or payment may be required)</u>

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