

Achieving treatment goals in type 2 diabetes can up life expectancy

April 19 2022



Reducing glycated hemoglobin (HbA1c), systolic blood pressure (SBP),

low-density lipoprotein cholesterol (LDL-C), and body mass index (BMI) can improve life expectancy (LE) among people with type 2 diabetes (T2D), according to a study published online April 18 in *JAMA Network Open*.

Hamed Kianmehr, Ph.D., from the University of Florida in Gainesville, and colleagues quantified potential gains in LE among 421 individuals with T2D categorized into quartiles based on levels of HbA1c, SBP, LDL-C, and BMI.

The researchers found that for people with T2D, lower BMIs of 24.3, 28.6, and 33.0 versus 41.4 kg/m² (mean of the first, second, and third versus fourth quartile) were associated with 3.9, 2.9, and 2.0 additional life-years, respectively. Compared with a SBP of 160.4 mm Hg, levels of 114.1, 128.2, and 139.1 mm Hg were associated with 1.9, 1.5, and 1.1 years gained in LE, respectively. Compared with LDL-C of 146.2 mg/dL, lower levels of 59.0, 84.0, and 107.0 mg/dL were associated with 0.9, 0.7, and 0.5 years gained in LE, respectively. For HbA1c, compared with the fourth quartile (9.9 percent), a reduction to the third quartile (7.7 percent) was associated with 3.4 years gain in LE; a further reduction to 6.8 percent (second quartile) was associated with a mean of 0.5 years gain in LE, while no benefit was seen with reduction to the first quartile (5.9 percent). Reducing HbA1c from fourth to first quartile overall was associated with an LE gain of 3.8 years.

"Our findings can be used by clinicians and patients in selecting optimal treatment goals, to motivate patients in achieving them, and to measure potential health benefits for interventions and programs to improve diabetes care in the United States," the authors write.

Two authors disclosed holding patents for BRAVO Risk Engine and BRAVO microsimulation model.

More information: [Abstract/Full Text](#)

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Citation: Achieving treatment goals in type 2 diabetes can up life expectancy (2022, April 19)
retrieved 25 April 2024 from

<https://medicalxpress.com/news/2022-04-treatment-goals-diabetes-life.html>

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