

Severe hypoglycemia in diabetes tied to cardiac disease

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(HealthDay)—For patients with type 1 and type 2 diabetes, severe hypoglycemia is associated with severe hypertension, hypokalemia, and QT prolongation, according to a study published online Aug. 12 in *Diabetes Care*.

Tetsuro Tsujimoto, M.D., from the National Center for Global Health and Medicine in Tokyo, and colleagues conducted a [retrospective cohort study](#) to assess vital signs, QT intervals, and newly diagnosed cardiovascular disease during severe hypoglycemia in patients with type 1 and type 2 diabetes. A total of 414 cases of severe hypoglycemia that could not be resolved by the patients themselves in a pre-hospital setting were included in analyses.

The researchers observed no significant difference in the median blood glucose levels between patients with type 1 (88 patients) and type 2 (326 patients) diabetes. In the [type 1 diabetes](#) group, the incidences of severe hypertension, hypokalemia, and QT prolongation were 19.8, 42.4, and 50.0 percent, respectively. For patients with type 2 diabetes, the corresponding proportions were 38.8, 36.3, and 59.9 percent, with a significant difference for the incidence of severe hypertension between the groups. Only in the type 2 diabetes group were newly-diagnosed cardiovascular disease during severe hypoglycemia (1.5 percent) and death (1.8 percent) observed. There was a significant difference in the [type 2 diabetes](#) group for [blood glucose levels](#) between the deceased and surviving patients.

"Type 1 and type 2 diabetic patients with severe hypoglycemia experienced many critical problems that could lead to cardiovascular disease, fatal arrhythmia, and death," the authors write.

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