Thiazide prophylaxis for kidney stones doesn't increase DM risk

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Prince Singh, from the Mayo Clinic in Rochester, Minn., and colleagues identified and validated incident stone formers in Olmsted County, Minn., from 1984 to 2011. The authors examined the risk of diabetes, with and without multivariate adjustment, after thiazide therapy.

The researchers found that 14 percent of the 2,350 incident stone formers were treated with thiazide diuretics at some point after the first stone event, and the thiazide diuretic was received only for kidney stone prevention in 3.6 percent. For those receiving and not receiving thiazide diuretics, the incidence of diabetes mellitus at 10 years after first stone event was 9.2 and 4.2 percent, respectively (hazard ratio [HR], 2.91; 95 percent confidence interval [CI], 2.02 to 4.20). The risk of diabetes was attenuated after multivariate adjustment (HR, 1.20; 95 percent CI, 0.78 to 1.83). There was further attenuation of risk among those receiving thiazide diuretics only for kidney stones (HR, 0.80; 95 percent CI, 0.28 to 2.23).

"Thiazide diuretic use for kidney stone prophylaxis was not associated with a high risk of diabetes mellitus," the authors write. "Larger studies are needed to determine if there is a modest risk of diabetes mellitus with thiazide diuretics."

Several authors disclosed financial ties to the pharmaceutical industry.

More information: Abstract

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