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Orthostatic hypotension in T2DM linked to riser type circadian BP

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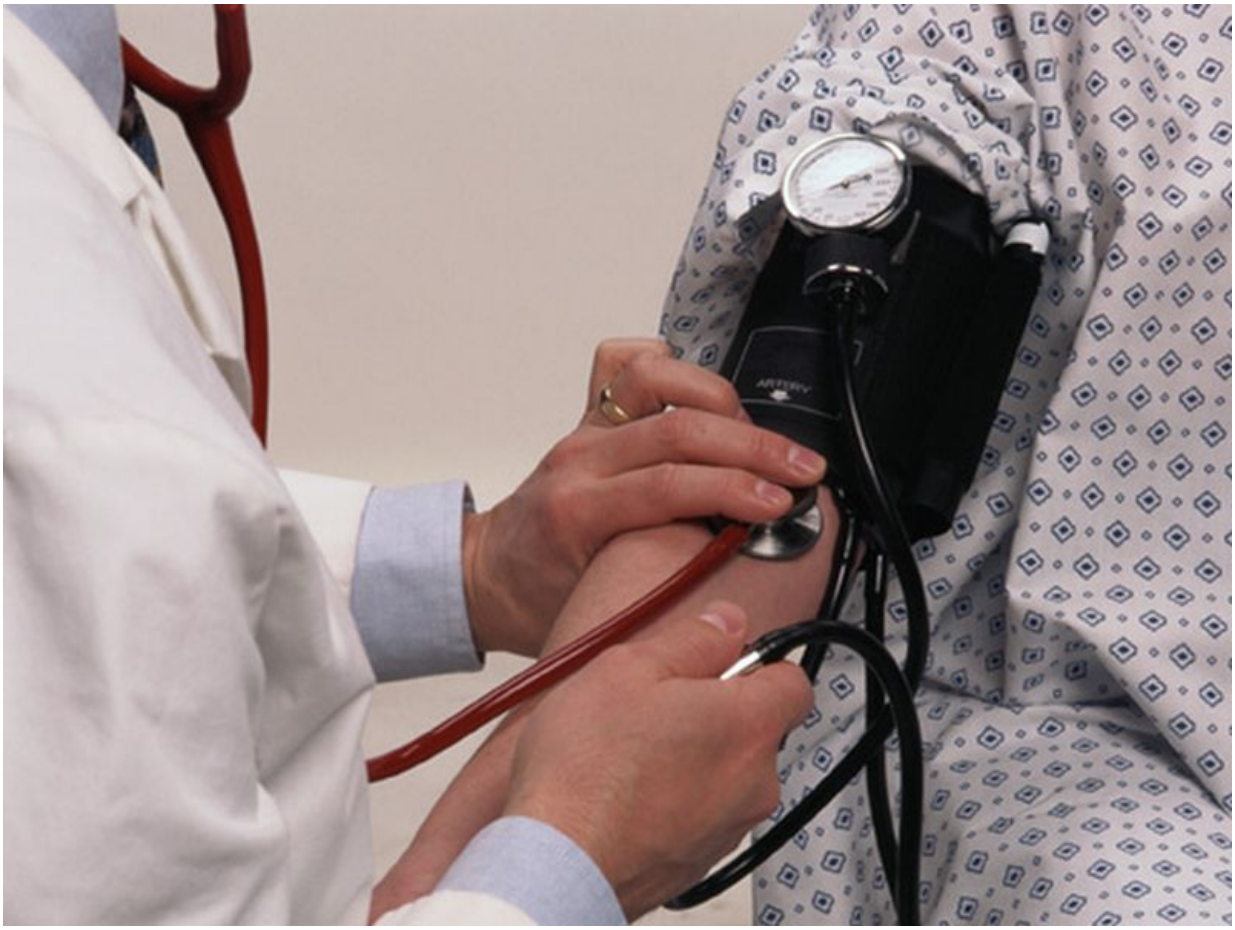

(HealthDay)—For patients with type 2 diabetes, orthostatic hypotension

(OH) is associated with riser patterns in the blood pressure (BP) circadian rhythm, as well as increased rates of mortality and major adverse cardiac and cerebrovascular events, according to a study published online May 11 in the *Journal of Diabetes Investigation*.

Jing Chang, from the Capital Medical University in Beijing, and colleagues examined the correlation between BP circadian rhythms and outcomes in 173 inpatients with type 2 diabetes. Participants were classified into an OH group (61 subjects) and a non-OH group (112 subjects) based on BP changes in supine and standing positions, and followed for an average of 45 ± 10 months after discharge.

The researchers found that the nighttime systolic BP and nighttime diastolic BP were higher in the OH group, and the blood pressure circadian rhythms were mainly of the riser type (67.21 percent). OH independently identified riser type circadian rhythm (adjusted odds ratio, 4.532). Compared with the non-OH group, the OH group had significantly increased incidence rates of mortality and major adverse cardiac (11.48 versus 2.68 percent) and cerebrovascular events (37.7 versus 8.93 percent).

"In subjects who had type 2 [diabetes] diagnosed with OH, the BP circadian rhythm usually showed riser patterns, and they had increased rates of mortality and major adverse cardiac and cerebrovascular events," the authors write.

More information: Abstract
Full Text

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