

Radiographic knee osteoarthritis tied to increased risk for death

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2.04), and renal diseases (HR, 1.14), as well as a reduced risk for cancer mortality (HR, 0.88). The risk for mortality from all causes was higher among participants with early RKOA onset (diagnosed before age 40; HR, 1.53), as was the risk for mortality from diabetes (HR, 7.18). There was an increased risk for mortality from CVD (HR, 1.89) and from diabetes (HR, 3.42) among obese participants with RKOA.

"Because radiographic knee osteoarthritis is associated with an increased risk of mortality from cardiovascular diseases, diabetes, and renal diseases, the management of patients with radiographic knee osteoarthritis should include the prevention and treatment of these conditions," the authors write.

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(HealthDay)—Radiographic knee osteoarthritis (RKOA) is associated with an increased risk for mortality from cardiovascular disease (CVD), diabetes, and renal diseases, but self-reported OA is not, according to a study published in the December issue of the *International Journal of Epidemiology*.

Angelico Mendy, M.D., from the University of Iowa in Iowa City, and colleagues analyzed data from 51,938 participants in the 1988-1994 and 1999-2010 National Health and Nutrition Examination Surveys. A subset of 2,589 participants had knee X-rays and were followed for a median of 13.6 years. Mortality was tracked through 2011 (overall median follow-up, 8.9 years).

The researchers found that self-reported OA and RKOA prevalences were 6.6 and 40.6 percent, respectively. There was no association between self-reported OA and [mortality](#). However, RKOA was associated with an increased risk for mortality from CVD (hazard ratio [HR], 1.43), [diabetes](#) (HR,

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