Diagnosis of Metabolic Syndrome in Diabetes Patients is of Little Value

However, data suggests that high blood pressure is a relevant independent risk factor.

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The diagnosis of metabolic syndrome in patients with type 2 diabetes, does not appear to add additional prognostic information, according to a study published recently in *Diabetes Care.*

In an observational study, involving approximately 4,000 patients with type 2 diabetes, researchers found no significant difference in mortality at a median follow-up of about 33 months in those with metabolic syndrome, compared to those without metabolic syndrome. However, diabetic patients with hypertriglyceridemia, hypertension and high waist circumference, were significantly associated with increased mortality. Low HDL was only associated with increased mortality in patients with hypertensive patients.

PATIENTS DIVIDED INTO FOUR GROUPS

During the study, patients were divided into four categories. These consisted of hyperglycemia plus either; elevated blood pressure, hypertriglyceridemia, low HDL cholesterol and elevated waist circumference.

Among patients with elevated blood pressure, those with metabolic syndrome at baseline did not show a higher mortality than those who did not have metabolic syndrome (7.9% vs 6.4%). Similar results were obtained in patients with hypertriglyceridemia (12.0% vs 10.7%), low HDL cholesterol (19.0% vs 14.0%), and elevated waist circumference (11.9% vs 11.1%).

> In patients with diabetes and one or more components of metabolic syndrome, the presence of further alterations does not modify their prognosis.

LONG-TERM PROGNOSIS NOT ALTERED

In diabetes patients with elevated blood pressure, adjusting for age and sex, a separate analysis showed that low HDL cholesterol (adjusted odds ratio [OR] 2.6 [95% CI, 1.2-5.5]), but not hypertriglyceridemia, and waist circumference was associated with higher mortality. Among diabetic patients with hypertriglyceridemia, low HDL cholesterol, and elevated waist circumference, mortality was associated with high blood pressure (OR 2.7 [1.4-5.1], OR 1.4 [1.1-2.4] and OR 2.3 [1.3-4.2] respectively.)

"In diabetic patients with one or more components of metabolic syndrome other than hyperglycemia, the presence of further alterations does not modify long-term prognosis," the authors concluded. ■

Monami M, Lambertucci L, Ungar A, et al. Is the third component of metabolic syndrome really predictive of outcomes in type 2 diabetic patients. *Diabetes Care.* 2006;29:2515-2517.