

## Study: Blood Glucose Measure No Predictor of CVD Risk



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According to a new study published in the March 26 issue of JAMA, which analysed close to 295,000 adults without a known history of diabetes or cardiovascular disease (CVD), the prediction of CVD risk is hardly enhanced when information about glycated hemoglobin (HbA 1c ), a measure of longer-term blood sugar control, is added to conventional CVD risk factors like smoking and cholesterol.

As per background information in the article, it has been suggested that information on blood sugar control could allow doctors to better predict who will develop CVD, due to the fact that increased glucose levels have been associated with higher CVD incidence.

Together with his team of colleagues with the Emerging Risk Factors Collaboration, Emanuele Di Angelantonio, MD, of the UK's University of Cambridge, undertook the evaluation of data drawn from 73 studies involving over 294,000 persons, to ascertain whether adding information on HbA 1c levels to information about conventional cardiovascular risk factors is associated with improvements in the prediction of CVD risk.

Predicted 10-year risk categories were classified as low (<5 percent), intermediate (5 percent to <7.5 percent), and high ( $\geq$  7.5 percent).

The researchers found primarily that the addition of details on levels of HbA 1c to that of conventional CVD risk factors only yielded at slight improvement in risk discrimination (how well a statistical model can separate individuals who do and do not go on to develop CVD).

They further uncovered that adding information on HbA 1c did not improve the accuracy of probability predictors for patients with and without CVD.

The authors write that in contrary to some guideline's recommendations, the current analysis of individual-participant data in close to 300,000 people (without known diabetes and CVD at baseline) points to measurement of HbA 1c not being linked to a clinically meaningful improvement in assessment of CVD risk.

Source: [JAMA](#)

26 March 2014

Published on : Wed, 26 Mar 2014