

年會徵求論文摘要

Aims/Introduction: Antihypertensive drugs have been linked to new-onset diabetes (NOD); however, data on the effect of these drugs on the development of NOD in hypertensive patients has not been well determined in a real-world setting. The aim was to investigate the association between antihypertensive drugs and NOD in a real-world setting.

Materials and Methods: We conducted a retrospective study of hypertensive Taiwanese patients receiving antihypertensive drugs treatment between January 2006 and December 2011. Clinical information and laboratory parameters were collected by reviewing the medical records. We estimated the odds ratios (ORs) of NOD associated with antihypertensive drug use; non-diabetic subjects served as the reference group.

Results: A total of 120 NOD cases were identified in 1001 hypertensive patients during the study period. The risk of NOD after adjusting sex, age, baseline characteristics and lipid profiles was higher among users of diuretics (OR, 1.65; 95% confidence interval (CI), 1.12-2.45), and Non-dihydropyridine (non-DHP) calcium channel blockers (OR, 1.96; 95% CI, 1.01-3.75) than among non-users. Beta-

blockers (OR, 1.39; 95% CI, 0.94-2.06), Dihydropyridine (DHP) calcium channel blockers (OR, 1.24; 95% CI, 0.84-1.82), angiotensin converting enzyme (ACE) inhibitors (OR, 1.53; 95% CI, 0.90-2.64), angiotensin receptor blockers (ARBs) (OR, 1.16; 95% CI, 0.77-1.75), alpha-blockers (OR, 0.71; 95% CI, 0.31-1.68), and vasodilators (OR, 0.92; 95% CI, 0.53-1.60) were not associated with risk of NOD.

Conclusions: The results of this study suggest that hypertensive patients who take diuretics and non-DHP calcium channel blockers were associated with a significant increase in the risk of NOD in a real-world setting.

KEY WORDS: Antihypertensive drugs, New-onset diabetes, Real-world

下資料為必填

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英文題目：A Retrospective Longitudinal Cohort Study of Antihypertensive Drug Use and New-onset Diabetes in a Real-World Setting

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日期：2012/07/18

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