

糖尿病患者における心血管リスクの管理

ADVANCEトライアルの結果、ペリンドプリルとインダパミドの併用は糖尿病患者における心血管疾患および死亡のリスクを有意に減少させることが示された

ADVANCE trial shows that combination perindopril-indapamide can significantly reduce risk for cardiovascular disease and death in patients with diabetes

ADVANCEトライアルの結果、ペリンドプリルとインダパミドの併用は糖尿病患者における心血管疾患およびそれに関連した死亡のリスクを有意に減少させることが示された、とEuropean Society of Cardiology学会で発表された。20カ国の糖尿病患者計11,140人を4.3年間にわたるスタディに組み入れ、合剤またはプラセボ投与群に無作為に割り付けた。既に降圧薬を内服している患者も組み入れ可能とした。既存の治療に合剤を加えることにより総死亡リスクが14%、心血管死亡リスクが18%減少した。冠動脈性心疾患イベントのリスクは14%、腎疾患の新規発症または増悪のリスクは21%減少した。

Full Text

The ADVANCE trial shows that the combination of perindopril and indapamide can reduce risk for cardiovascular disease and related mortality in patients with diabetes, according to a presentation at the annual meeting of the European Society of Cardiology.

ADVANCE (Action in Diabetes and Vascular Disease), the largest-ever study of treatments for diabetes, also found that the fixed-dose drug therapy reduced risk for development or progression of kidney disease.

One of the study leaders, Professor Stephen MacMahon from The George Institute for International Health in Australia, said "these results represent an important step forward in health care for the millions of people with diabetes worldwide. This treatment reduced the likelihood of dying from the complications of diabetes by almost one-fifth, with virtually no side-effects."

A total of 11,140 patients with diabetes from 20 countries worldwide participated in the 4.3 year project. Half received daily treatment with a single tablet containing a fixed combination of perindopril and indapamide, whereas the other half were randomized to matching inactive placebo.

Dr. Anushka Patel, Study Director from The George Institute, said "the participants in ADVANCE were already receiving most of the usual treatments provided to patients with diabetes, including other drugs to lower blood pressure. However, addition of the fixed combination of perindopril and indapamide reduced the risk of death from any cause by 14 percent and the risk of death from cardiovascular disease by 18 percent. In absolute terms, one death would be avoided for every 79 patients treated with the fixed combination of perindopril and indapamide for 5 years. The risk of coronary heart disease events was reduced by 14 percent and the risk of new or worsening kidney disease was reduced by 21 percent."

Professor John Chalmers, the author of previous international guidelines for the treatment of hypertension and chairman of the study management group, said, "the results clearly demonstrate that we have the tools to blunt the impact of the global diabetes epidemic facing rich and poor countries alike. But concerted action is urgently required to ensure that patients with diabetes are identified and provided with treatments proven to improve important outcomes like survival."

Conference

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