

Glucocorticoid use ups diabetes risk in rheumatoid arthritis

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glucocorticoid use contributed most to the current risk of DM; current risk was not influenced by doses taken more than six months previously. In the CPRD, hazard ratios of 1.20, 1.43, and 1.48 were seen for 5 mg of prednisolone equivalent dose for the last one, three, and six months, respectively, compared with nonusers.

"Glucocorticoid use is a clinically important and quantifiable risk factor for DM," the authors write. "Risk is influenced by the dosage and treatment duration, although only for glucocorticoid use within the last six months."

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(HealthDay)—For patients with rheumatoid arthritis (RA), glucocorticoid treatment is associated with increased risk of diabetes mellitus (DM), according to a study published in the May issue of *Arthritis & Rheumatology*.

Mohammad Movahedi, M.D., Ph.D., from the University of Manchester in the United Kingdom, and colleagues conducted a cohort study using two databases: the Clinical Practice Research Datalink (CPRD), with 21,962 RA [patients](#), and the U.S. National Data Bank for Rheumatic Diseases (NDB), with 12,657 RA patients. Data were extracted on the dosage and timing of glucocorticoid use.

The researchers found that, compared with nonusers, current glucocorticoid users had hazard ratios of 1.30 and 1.61 for DM in the CPRD and NDB, respectively. Increases in risk were confirmed with glucocorticoid dosage and duration in a range of conventional statistical models. In a novel weighted cumulative dose model, recent

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