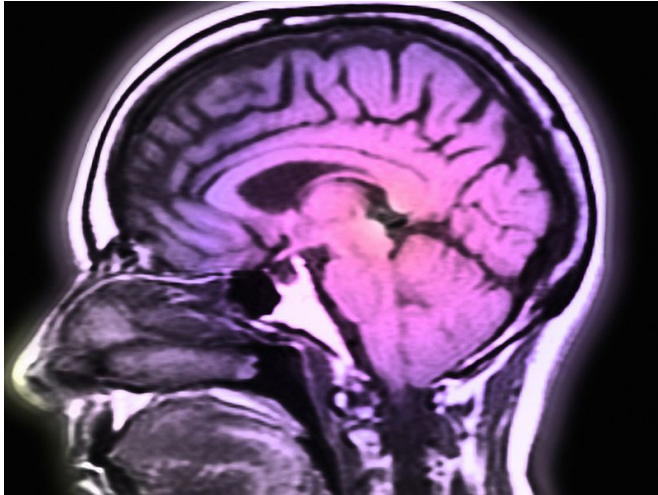


Insulin resistance predicts later cognitive decline

10 April 2017



verbal fluency over follow-up ($P = 0.004$ for both). Word-list learning and word-list delayed recall scores were not predicted by baseline HOMA-IR or insulin. There were no interactions between cognitive test performance and HOMA-IR and apolipoprotein E ϵ 4 genotype, hs-CRP, or type 2 diabetes. Baseline levels of fasting glucose and hs-CRP levels were not associated with cognitive functioning.

"Prevention and treatment of insulin resistance might help reduce [cognitive decline](#) later in life," the authors write.

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(HealthDay)—Higher serum fasting insulin and insulin resistance predict poorer verbal fluency and a steeper decline in future verbal fluency, according to a study published online April 5 issue of *Diabetes Care*.

Laura L. Ekblad, M.D., from the University of Turku in Finland, and colleagues examined data from the Finnish nationwide, population-based Health 2000 Health Examination Survey and its 11-year follow-up, the Health 2011 study (3,695 participants; mean age at baseline, 49.3 years; 55.5 percent women). The authors sought to assess the roles of homeostatic model assessment of [insulin resistance](#) (HOMA-IR), fasting [insulin](#) and glucose, glycated hemoglobin, and high-sensitivity C-reactive protein (hs-CRP) as predictors of cognitive performance.

The researchers found that higher baseline HOMA-IR and fasting [insulin levels](#) were independent predictors of poorer verbal fluency performance ($P = 0.0002$ for both) and of a greater decline in

APA citation: Insulin resistance predicts later cognitive decline (2017, April 10) retrieved 1 May 2021 from <https://medicalxpress.com/news/2017-04-insulin-resistance-cognitive-decline.html>

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