

Type 2 Tied To Colorectal Adenoma Risk

BY HEIDI SPLETE

FROM THE ANNUAL MEETING OF
THE AMERICAN COLLEGE OF
GASTROENTEROLOGY

SAN ANTONIO – Colorectal adenomas were significantly more common in adults with type 2 diabetes, compared with the general adult population, based on a study of 860 patients who underwent screening colonoscopy.

“Colonic adenomas and advanced adenomas were independently predicted by diabetes,” wrote Dr. Nisheet Waghay of MetroHealth Medical Center in Cleveland, and colleagues. They presented their findings in a poster at the meeting.

Previous studies have shown a 30%-40% increase in colorectal cancer risk in adults with type 2 diabetes, but the association between type 2 diabetes and the risk of colorectal adenomas has not been well studied, the investigators explained.

The researchers reviewed colonoscopy data from 269 adults with type 2 diabetes and 591 adults without diabetes who were screened at a single medical center between January 2007 and January 2010.

All of the following findings – three or more adenomas, adenomas larger than 1 cm, a proximal location of advanced adenomas, and a higher mean number of polyps – were significantly more common in the diabetes patients than in the nondiabetics.

The percentage of patients with three or more adenomas was 14% in those with diabetes vs. 10% in the general population, and the rate of adenomas larger than 1 cm was 9.7% and 4.7%, respectively.

The average number of polyps in patients with diabetes vs. those without diabetes was 4.9 vs. 2.5. In addition, 68% of advanced adenomas in the diabetes patients were proximal, compared with 31% of those in the general population.

The average age of the patients with diabetes was 57 years, vs. 61 years in the general population, but this difference was not significant. There were no significant differences between the two groups in terms of body mass index, family history of colorectal cancer, or patient use of alcohol, tobacco, or non-steroidal anti-inflammatory drugs. Approximately 60% of the patients in both groups were black.

The findings suggest that type 2 diabetes influences not only the number of adenomatous polyps, but also their location within the colon. More research is needed to confirm the results, but this study “adds plausibility that diabetes may play a role in the adenoma-carcinoma sequence,” Dr. Waghay and colleagues noted.

The researchers said that they had no financial conflicts to disclose. ■

Oltmesartan Stalls Microalbuminuria

BY MIRIAM E. TUCKER

FROM THE ANNUAL MEETING OF THE EUROPEAN
ASSOCIATION FOR THE STUDY OF DIABETES

STOCKHOLM – Olmesartan significantly reduced the time to microalbuminuria in a randomized, placebo-controlled, double-blind multicenter study of 4,447 patients with type 2 diabetes.

The Randomized Olmesartan and Diabetes Microalbuminuria Prevention (ROADMAP) trial investigated whether early treatment with the angiotensin

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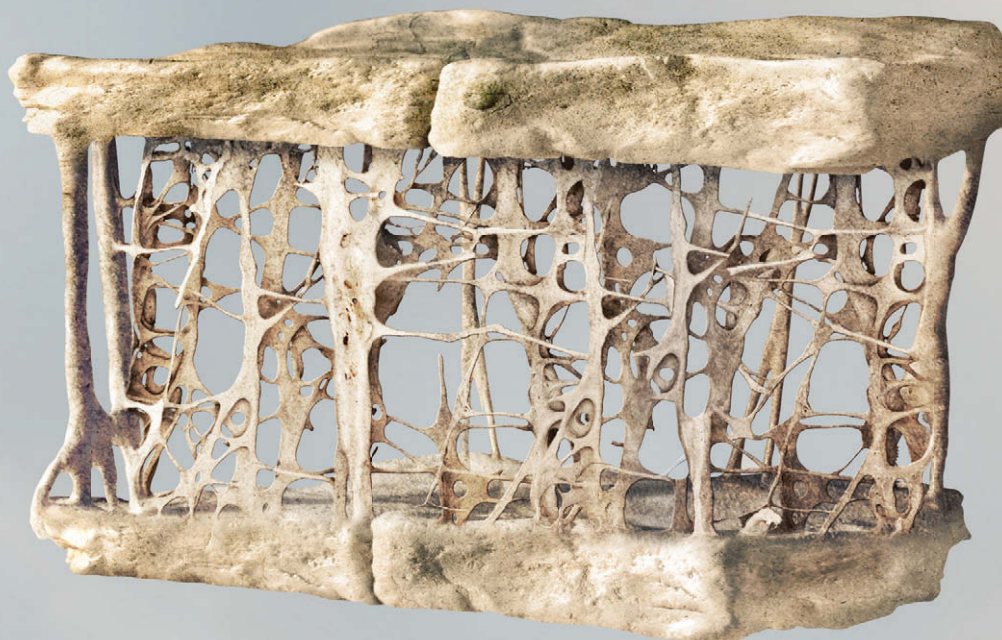
Major Finding: The cumulative incidence of microalbuminuria was 8.2% of patients on olmesartan vs. 9.8% of placebo patients, for a highly significant risk reduction of 23%.

Data Source: Randomized, placebo-controlled, double-blind, multicenter ROADMAP trial of 4,447 patients with type 2 diabetes and one or more other cardiovascular risk factors but with normoalbuminuria.

Disclosures: The study was funded by Daiichi-Sankyo, which manufactures olmesartan under the name Benicar.

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