

Cardiovascular Benefits of Statins vs. Risk for Incident Diabetes

One additional case of incident diabetes occurred for every 255 patients who received statins for 4 years.

Does statin therapy raise risk for incident diabetes? When statins were compared with placebo (or usual care), mixed signals have emerged, with statins seeming to raise diabetes incidence in some trials and to lower it in others.

In a collaborative meta-analysis, investigators reviewed data from 13 trials in which 90,000 stable nondiabetic patients were randomized to receive a statin or placebo (or usual care) and were followed for a mean of 4 years. The rate of incident diabetes was slightly but significantly higher in patients who took statins than in those who received placebo or usual care (4.9% vs. 4.5%; odds ratio, 1.09). In absolute terms, one additional case of incident diabetes occurred for every 255 patients who received statins for 4 years. No variations in diabetes risk were noted among different statins. The association of statin use and incident diabetes was stronger in trials that involved older patients.

Comment: Although statins might cause one additional case of diabetes per 255 nondiabetic patients treated for 4 years, data from another meta-analysis indicate that statins would prevent five major coronary events in those 255 patients. Therefore, the authors recommend that risk for diabetes should not deter therapy with statins in patients at moderate-to-high cardiovascular risk, but they suggest that older patients who take statins be monitored for hyperglycemia.

— [Bruce Soloway, MD](#)

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Sattar N et al. Statins and risk of incident diabetes: A collaborative meta-analysis of randomised statin trials. *Lancet* 2010 Feb 27; 375:735.