

YEARS OF LIFE GAINED BY MULTIFACTORIAL INTERVENTION IN PATIENTS WITH TYPE 2 DIABETES AND MICROALBUMINURIA – 21 YEARS FOLLOW-UP ON THE STENO-2 STUDY

Jens Oellgaard^{1,2,3}, Peter Gæde^{1,2}, Peter Rossing^{3,4,5}, Henrik Lund-Andersen⁶, Hans Henrik Parving^{5,6}, Oluf Pedersen⁸

1: Slagelse Hospital, Slagelse, Denmark; 2: University of Southern Denmark, Odense, Denmark; 3: Steno Diabetes Center, Gentofte, Denmark; 4: Aarhus University, Aarhus, Denmark; 5: University of Copenhagen, Copenhagen, Denmark; 6: Rigshospitalet, Copenhagen, Denmark; 7: Novo Nordisk Foundation Center for Basic Metabolic research, Copenhagen, Denmark

SUMMARY

7.8 years of intensified, multifactorial intervention targetting multiple risk factors for late complications in patients with type 2 diabetes and micro-albuminuria increased survival by 7.9 years. This increased survival was matched by time free of incident CVD.

AIMS

To study the potential long-term impact of 7.8 years intensified, multifactorial intervention in patients with type 2 diabetes mellitus and microalbuminuria in terms of gained years of life and years free from incident CVD.

METHODS

The original intervention (mean treatment duration 7.8 years) involved 160 patients with type 2 diabetes and microalbuminuria who were randomly assigned to receive either conventional therapy or intensified, multifactorial treatment including both behavioural and pharmacological approaches. After 7.8 years the study continued as an observational follow-up with all patients receiving treatment as for the original intensive-therapy group.

The primary endpoint was the difference in median survival time between the original treatment groups with and without incident cardiovascular disease.

RESULTS

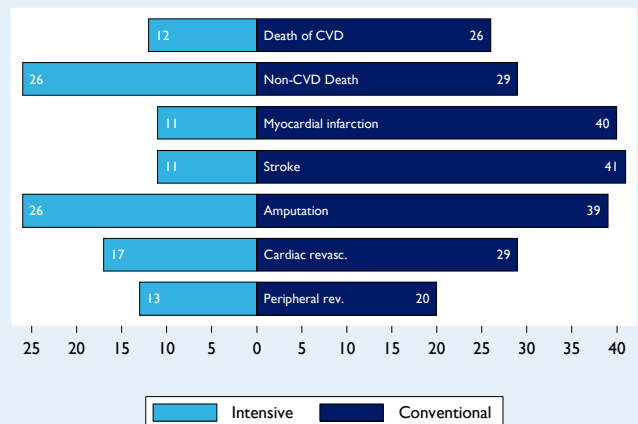
38 intensive-therapy patients vs 55 conventional-therapy patients died during follow-up (HR 0.55 [95% CI 0.36, 0.83], $p = 0.004$). The patients in the intensive-therapy group survived for a median of 7.9 years longer than the conventional-therapy group patients ($p = 0.005$).

Median time before first cardiovascular event after randomisation was 8.1 years longer in the intensive-therapy group ($p = 0.001$).

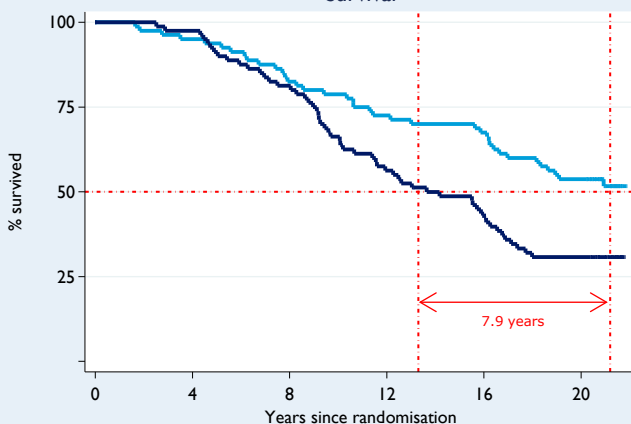
The reduction in mortality was driven by a relative risk reduction in death of CVD by 62 %.

Patients in the original conventional-therapy group experienced 2.95 times more events pr. person year than patients in the intensive-therapy group ($p < 0.001$).

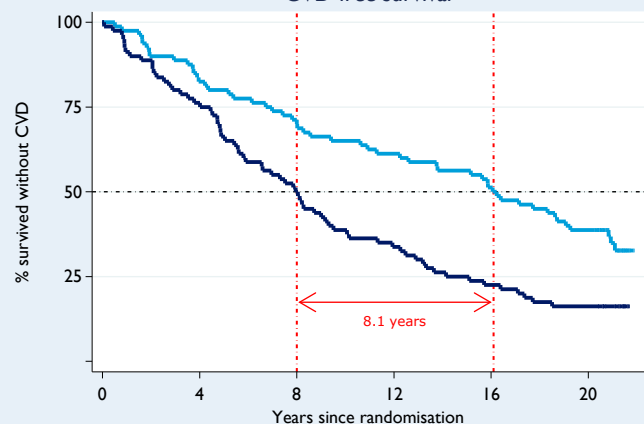
Total Number of Events



Survival



CVD-free survival



Corresponding author: Jens Oellgaard, jchq@steno.dk

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