



The 7th World Congress on
**Controversies to Consensus in Diabetes,
Obesity and Hypertension (CODHy)**
Sorrento, Italy April 11-13, 2019
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VASCULAR RISK IN LADA – AN ONGOING CONTROVERSY

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Up to 12% of adults with a clinical diagnosis of type 2 diabetes (T2D) actually have Latent Autoimmune Diabetes of Adults (LADA). I have confirmed that these adults have a different cardiovascular risk profile, compared with T2D in 17,072 diabetic subjects from the United Arab Emirates and in 5102 participants enrolled in the United Kingdom Prospective Diabetes Study (UKPDS). LADA subjects tend to have higher mean HbA_{1c} and HDL-cholesterol values, but lower body mass index, waist circumference, total cholesterol and systolic blood pressure values ($p < 0.01$ for all). Whether this translates in a different cardiovascular risk remains controversial. I showed that studies with a relatively short follow-up overall did not find differences in cardiovascular outcomes in LADA compared with T2D, questioning whether the impact of CV risk factors may differ between these two types of diabetes. Therefore, I have prospectively evaluated the long-term risk of major adverse cardiovascular events in the 567 UKPDS participants with LADA compared with 4495 UKPDS participants with T2D. After median (IQR) 17.3 (12.6-20.7) years follow-up, MACE occurred in 157 (17.4 per 1000 person-years) LADA and 1544 (23.5 per 1000 person-years) T2D participants respectively (HR 0.73, 95% Confidence Interval [CI] 0.62–0.86, $p < 0.001$). However, after adjustment for known risk factors, this difference was no longer significant (HR_{adj} 0.90, 95% CI 0.76–1.07, $p = 0.22$). These results suggest that, among subjects with a clinical diagnosis of T2D, those with LADA have a lower risk of cardiovascular events, which is predominantly explained by their more favorable conventional CV risk profile.



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