

Glucose Tests Flag Diabetes in ACS Patients

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The combination of fasting and admission plasma glucose tests was a useful initial screening tool to identify diabetes in patients with acute coronary syndrome, according to a study of 140 patients in a coronary care unit.

It has been shown that diabetes is underdiagnosed in ACS patients and is a

strong predictor of future cardiovascular mortality, Dr. Onyebuchi E. Okosieme of Cardiff (Wales) University and colleagues wrote.

The oral glucose tolerance test (OGTT) is the preferred method for detecting diabetes, but the OGTT is expensive and time-consuming and “is underused in clinical practice,” according to the authors. However, the alternatives—fasting plasma glucose (FPG) and admission plas-

ma glucose (APG)—alone often fail to detect diabetes after a cardiac event.

In this study, each patient (average age 67 years, 79% men) underwent all three methods of testing glucose levels, and were classified as having normal glucose tolerance, impaired glucose tolerance, or diabetes.

According to the results of the OGTT, 27% of this population (38 patients) had previously undiagnosed dia-

betes, 39% (54 patients) had previously undetected impaired glucose tolerance, and the remainder had normal glucose tolerance. When the results of the other testing methods were compared with those of the preferred method, the FPG had 82% sensitivity and 65% specificity in detecting diabetes, whereas the APG had 67% sensitivity and 83% specificity.

No conflicts of interest were reported by the researchers. ■

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