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A review of available data from the ACCORD (Action to Control Cardiovascular Risk in Diabetes) Trial, which is sponsored by the National Heart, Lung, and Blood Institute of the National Institutes of Health, has led investigators to halt a portion of the study due to safety concerns. The purpose of this portion of the trial was to determine the impact of very tight glucose control, aiming at a normal hemoglobin A1c of less than 6 percent, compared to less-intensive glucose control (or standard treatment) with an hemoglobin A1c of 7 to 7.9 percent in diabetic patients with vascular disease or multiple cardiovascular risk factors. All participants in the trial are between 40 and 79 years of age, have type 2 diabetes, and either have known cardiovascular disease or two known risk factors. Prior clinical trials have suggested that reducing blood sugar to levels found in non-diabetic adults may reduce the rate of cardiovascular diseases among those with diabetes.

The study found that patients in the treatment group with the goal of reducing their hemoglobin A1c to less than 6 percent had a slightly higher risk of dying than those in the standard treatment group. Of the 10,251 participants enrolled in the study, 257 in the intensive treatment group have died, compared with 203 within the standard treatment group. The mortality rates in both groups were lower than seen in similar populations in other studies. Patients in the intensive treatment group have been moved to the less-intensive treatment plan for the duration of the ACCORD Trial. Extensive analysis of the study data has not been performed; therefore, the exact reason for the increased death rate among those patients on the intensive treatment plan is not yet known.

The Endocrine Society urges patients with diabetes to contact their physician before making any changes in their treatment plan.