## **European Respiratory Society Annual Congress 2013**

**Abstract Number: 2772** 

**Publication Number: P2607** 

Abstract Group: 4.3. Pulmonary Circulation and Pulmonary Vascular Disease

Keyword 1: Pulmonary hypertension Keyword 2: Comorbidities Keyword 3: No keyword

**Title:** Comparison of prevalence of diabetes mellitus in patients with idiopathic pulmonary arterial hypertension and distal chronic thromboembolic pulmonary hypertension

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**Body:** Increased prevalence of diabetes mellitus (DM) in idiopathic pulmonary arterial hypertension (IPAH) has been described. It is also known to be a risk factor for acute venous thromboembolism. Distal chronic thromboembolic pulmonary hypertension (dCTEPH) shares histological features with IPAH. We compared the prevalence of DM in IPAH and dCTEPH. The Papworth Pulmonary Vascular Diseases Unit database identified patients with IPAH and dCTEPH from 01/01/2006 to 31/12/2012. Baseline characteristics at diagnosis were recorded.

## Baseline characteristics

Distal CTEPH	IPAH
56	81
57.1	61.7
64.1	58.6*
26.2	27.1
28.4	34.8 <sup>*</sup>
48.3	58.5
11.1	11.6
1.8	18.5 <sup>*</sup>
10.5	16.0
8.8	9.9
17.5	28.4
3.5	17.3*
	56 57.1 64.1 26.2 28.4 48.3 11.1 1.8 10.5 8.8 17.5

Obesity <sup>b</sup>		32.5
Obstructive sleep apnoea <sup>b</sup>	0.0	6.2

a mean; b %; \* p<0.05

The prevalence of DM was significantly lower in the dCTEPH group compared to the IPAH group, despite the group being older and having similar BMIs. Limitations of this study are retrospective data collection and small population size. Within these limitations the prevalence of DM was lower in the dCTEPH group and higher in the IPAH group compared to the national prevalence (7.9%). The other characteristics are similar to published registries. The different phenotypes suggest distinct risk factors are involved in these conditions that otherwise share many pathobiological processes. Our findings are preliminary and need to be confirmed in a bigger cohort including patients with proximal CTEPH.