SUMMARY
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- Among all the other conventional risk factors, insulin resistance appears to major risk factor associated with respect to severity of CAD.
- The severity of CAD appears to be with a threshold level of 5 years. The severe cardiovascular complications were seen in more than 5 years of diabetes. Thus window of opportunity for targeting the cardiovascular complications in type 2 diabetes mellitus is restricted to 0 to 5 years of diabetes.
- The Manipal diabetes coronary artery severity score [MDCASS 2] is a simple and effective non-invasive tool that could easily predict subjects with syntax score less than 22 enabling effective identification of patients who are likely to be suitable for angioplasty.
- Hyperinsulinemia (Insulin > 20 µIU/ml) and HOMA-IR > 3.4 were associated with Complex and Severe CAD (syntax score > 22). Thus help in identifying high risk individuals at an earlier stages of diabetes.
- Low HOMA-IR (HOMA-IR < 2.5) was associated with favorable coronary profile in patients with long standing diabetes. This will help us to identify patients who are at lower risk for CAD.
- Since insulin resistance/hyperinsulinemia a known be relatively stable over a period of time. Thus selective, elective and effective individualized treatment for type 2 diabetes mellitus is possible.
- Hyperinsulinemia (Insulin > 20 µIU/ml) is also associated with adverse cardiac events at 1 year after undergoing coronary angiogram. Thus making it possible to identify individuals who are likely to develop complications and are needed to follow up regularly with aggressive medical management.