# Metabolic Syndrome/Insulin Resistance Syndrome/Pre-Diabetes

## New section in *Diabetes Care*

Diabetes, at least type 2, has been recently described (facetiously?) as a state of heightened cardiovascular morbidity and mortality associated with hyperglycemia. Those of us who have spent our professional lives trying to lower glycemia might take umbrage at that, but there is no denying that ~50% of type 2 diabetic patients at the time of diagnosis have cardiovascular disease, at least another 25% will develop it, and two-thirds or more will die from it. In 1988, Reaven (1) pointed out a constellation of risk factors in insulin-resistant people that was associated with increased cardiovascular disease that he named Syndrome X. Subsequently, that syndrome has been called the "Metabolic Syndrome" or the "Insulin Resistance Syndrome." (I personally prefer the latter because insulin resistance characterizes these individuals and certain components are not "metabolic," e.g., central obesity and hypertension.) Although it's not entirely clear that the risk for cardiovascular disease is greater than the sum of the individual risk factors (2), there is no denying that the Insulin Resistance Syndrome is receiving a lot of attention. A Medline search revealed that over 300 articles were published in 2002 concerning the insulin resistance syndrome. This new section in *Diabetes Care* is called "Metabolic Syndrome/Insulin Resistance Syndrome/Pre-Diabetes." I have included pre-diabetes because the American Diabetes Association has recently defined pre-diabetes as impaired fasting glucose and/or impaired glucose tolerance, and their ability to predict diabetes is under active investigation. A Medline search revealed that over 200 articles were published in 2002 concerning the pre-diabetic state. The revised criterion for impaired fasting glucose in the Expert Committee's report in this issue (3) is certain to lead to new studies (or at least reassessment of older data). It is my hope that this new section will help focus attention on this very important area for our readership as well as attract increasing numbers of high-quality studies.

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3. The Expert Committee on the Diagnosis and Classification of Diabetes Mellitus: Follow-up report on the diagnosis of diabetes mellitus. *Diabetes Care* 26:3160–3167, 2003