The Metabolic Syndrome: Time for a Critical Appraisal: Joint Statement From the American Diabetes Association and the European Association for the Study of Diabetes

Response to Kahn et al.

The joint statement from the American Diabetes Association and the European Association for the Study of Diabetes (1) takes issue with the entity of the metabolic syndrome, criticizing it on a number of levels, including the seemingly arbitrary selection of its component risk factors and their corresponding cutoff values, the lack of concordance between competing definitions of the metabolic syndrome, and, fundamentally, that the syndrome itself conveys no greater information than the sum of its component risk factors.

Unfortunately, these criticisms detract from the primary utility of the metabolic syndrome as a means of assisting the front-line practitioner in identifying risk factors that require clinical attention. This is especially pertinent for mental health practitioners who have become increasingly aware of the vulnerability of the seriously and persistently mentally ill in developing diabetes and cardiovascular disease and the potential impact of psychotropic medication on this risk (2). The initial focus of attention had been on monitoring for obesity, but body weight is only one of many parameters that need to be assessed on a routine basis. The concept of the metabolic syndrome allows for a discussion of other important traditional cardiovascular risk factors that require ongoing monitoring such as blood pressure, lipid profile, and glucose. Furthermore, unlike most of the existing cardiovascular risk algorithms, the metabolic syndrome includes consideration of central obesity and serum triglyceride levels. Most psychiatrists are unlikely to calculate Framingham risk scores. Hence, the pragmatic value of the metabolic syndrome is not in studying pathophysiology per se or in designing clinical trials for those who rigidly meet its criteria, but rather the usefulness of the concept is in the ongoing education of practitioners and, ultimately, in the improvement of overall health care (3).

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References

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