2. Hayashi T, Kawashima S, Nomura H, Itoh H, Watanabe H, Ohrui T, et al; Japan Cholesterol and Diabetes Mellitus Investigation Group. Age, gender, insulin and blood glucose control status alter the risk of ischemic heart disease and stroke among elderly diabetic patients. Cardiovasc Diabetol 2011;10:86.
3. Daniel MJ. Lipid management in patients with type 2 diabetes. Am Health Drug Benefits 2011;4:312.
4. Johnson RJ, Kang DH, Feig D, Kivlighn S, Kanellis J, Watanabe S, et al. Is there a pathogenetic role for uric acid in hypertension and cardiovascular and renal disease? Hypertension 2003;41:1183–90.
5. Hovind P, Rossing P, Johnson RJ, Parving HH. Serum uric acid as a new player in the development of diabetic nephropathy. J Ren Nutr 2011;21:124–7.
6. Stamboul K, Zeller M, Fauchier L, Gudjoncik A, Buffet P, Garnier F, et al. Incidence and prognostic significance of silent atrial fibrillation in acute myocardial infarction. Int J Cardiol 2014;174:611–7.

Author`s Reply

To the Editor,

We appreciate the valuable comments and suggestions in your letter in response to our article "Relationship between glycemic control and serum uric acid level in acute myocardial infarction."

1. In our retrospective study, we aimed to investigate the relationship between glycemic control and the serum uric acid (SUA) level among patients with acute myocardial infarction (AMI). Therefore, our control group was non-diabetic patients with AMI. Similarly, some other studies investigating the relationship between AMI and SUA did not have a healthy control group [1, 2].

2-3. Since it was a retrospective study, it was not possible to get information about patient use of lipid-lowering drugs or protein intake. This was mentioned in the text.

4. We agree that the incidence of diabetes in Turkey has been growing and recent studies support that [3, 4].

As mentioned, the relationship between glycemic control and the SUA level in AMI should be evaluated multifactorialy [5]. We concluded that further research should be performed in order to make a definite decision about the relationship between glycemic control and the SUA level in AMI.

Best regards,

References

1. Tatli E, Aktoz M, Buyuklu M, Altun A. The relationship between coronary artery disease and uric acid levels in young patients with acute myocardial infarction. Cardiol Journal 2008; 15: 21-5.
2. Biswas K, Halder S, Sarkar R, Roy K. A study on prognostic significance of serum uric acid in acute myocardial infarction in a tertiary care institute. Int J Res Med Sci 2016;4:4557-62. [CrossRef]
3. Tamayo T, Rosenbauer J, Wild SH, Spijkerman AM, Baan C, Forouhi NG, Herder C, Rathmann W. Diabetes in Europe: an update. Diabetes Res Clin Pract. 2014;103:206-17. [CrossRef]
4. International Diabetes Federation. Diabetes Atlas, 8th Edition, Turkey Country Report 2017.
5. Kushiyama A, Tanaka K, Hara S, Kawazu S. Linking uric acid metabolism to diabetic complications. World J Diabetes 2014;5:787-95. [CrossRef]

Address for correspondence: Zeynep Levent Cirakli, MD.
Bakirkoy Dr. Sadi Konuk Education and Research Hospital
Zuhuratbaba Mahallesi Tevfik Saglam Caddesi
No: 11 Bakirkoy 34147
Istanbul, Turkey
E-mail: zturci@mynet.com