

## Reducing the Risk of Cardiovascular Disease in Patients With Diabetes

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### Pharmacy Credit

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1. Each participant evaluating the activity is eligible to receive CE credit.
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### Sample of Online Posttest

Choose the best answer for each of the following:

1. **Traditional cardiovascular (CV) risk factors for type 2 diabetes (T2D) include which of the following?**
  - A. Arrhythmia
  - B. Hypotension
  - C. Dyslipidemia
  - D. Body mass index (BMI) less than 30
2. **Jennifer has T2D and struggles with maintaining her diet and a regular exercise program. A recent physical exam and labs revealed the following: glycated hemoglobin, 8.5%; low-density lipoprotein cholesterol, 162 mg/dL; blood pressure, 140/92 mm Hg; and a BMI of 32. Which of the following T2D features is strongly associated with obesity and hypertension?**
  - A. Insulin resistance
  - B. Dyslipidemia
  - C. Poorly controlled blood sugars
  - D. Smoking
3. **Which of the following studies clearly demonstrated the link between early intensive glycemic therapy and a lower risk of macrovascular complications?**
  - A. UKPDS
  - B. ACCORD
  - C. ADVANCE
  - D. CVD-REAL
4. **In addition to achieving superiority in the primary outcome of 3P-MACE, which of the following agents demonstrated a significant benefit in reduction of nonfatal stroke?**
  - A. Empagliflozin
  - B. Pioglitazone
  - C. Semaglutide
  - D. Liraglutide
5. **In addition to the primary outcome, the EMPA-REG trial demonstrated noninferiority of empagliflozin versus placebo in which of the following secondary outcomes?**
  - A. All-cause mortality and nonfatal stroke
  - B. Nonfatal myocardial infarction
  - C. CV death and nonfatal stroke
  - D. CV death and all-cause mortality
6. **Which of the following agents has been shown to increase the risk of heart failure?**
  - A. Pioglitazone
  - B. Canagliflozin
  - C. Liraglutide
  - D. Semaglutide
7. **A recent estimate on economic costs indicated that CV disease accounts for \_\_\_\_\_ of medical expenditures associated with diabetes in people aged 45 to 64 years.**
  - A. 10%
  - B. 27%
  - C. 33%
  - D. 50%
8. **In 2008, the FDA issued a guidance that recommended the evaluation of CV risks for new antidiabetic drugs. Based on clinical trial data, the SGLT2 inhibitors empagliflozin and canagliflozin and select glucagon-like peptide-1 receptor agonists (GLP-1 RAs), liraglutide and semaglutide:**
  - A. Have no impact on the risk of major CV adverse events
  - B. Increase the risk of major CV adverse events
  - C. Reduce the risk of major CV adverse events
  - D. Have an undetermined risk of major CV adverse events

9. Based on the results of the CVD-REAL study, which of the following treatments was associated with lower rates of myocardial infarction and stroke?
- A. Biguanides
  - B. Insulin
  - C. SGLT2 inhibitors
  - D. DDP-4 inhibitors
10. SGLT2 inhibitors have demonstrated significant beneficial CV outcomes and are generally well tolerated. In making individualized treatment decisions, which of the following are potential adverse events?
- A. Insomnia
  - B. Prolonged and frequent migraines
  - C. Increased risk of bone fracture and decreased bone mineral density
  - D. Increased risk of eczema and skin rashes

# SAMPLE POSTTEST