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# Targeting intensive glycaemic control versus targeting conventional glycaemic control for type 2 diabetes mellitus (Review)

Hemmingsen B, Lund SS, Gluud C, Vaag A, Almdal TP, Wetterslev J

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[Intervention Review]

# Targeting intensive glycaemic control versus targeting conventional glycaemic control for type 2 diabetes mellitus

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**Editorial group:** Cochrane Metabolic and Endocrine Disorders Group.
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## REASON FOR WITHDRAWAL FROM PUBLICATION

The Cochrane Metabolic and Endocrine Disorders Group withdrew this review as of Issue 7, 2015 because the involvement of two authors (C Hemmingsen and SS Lund) being employed in pharmaceutical companies. The authors of the review and the Cochrane Metabolic and Endocrine Disorders Group did not find that this was a breach of the rules of the Cochrane Collaboration at the time when it was published. However, after the publication of the review, the Cochrane Collaboration requested withdrawal of the review due to the employment of the two authors. A new protocol for a review to cover this topic will be published. This will have a new title and a markedly improved protocol fulfilling new and important developments and standards within the Cochrane Collaboration as well as an improved inclusion and search strategy making it necessary to embark on a completely new review project.

The editorial group responsible for this previously published document have withdrawn it from publication.

## WHAT'S NEW

| Date | Event | Description |
|---|---|---|
| 28 July 2015 | Amended | Status changed to withdrawn (see published notes) |

## HISTORY

Protocol first published: Issue 4, 2009
Review first published: Issue 6, 2011

| Date | Event | Description |
|---|---|---|
| 6 November 2014 | Amended | Declaration of interest amended |
| 4 September 2014 | Amended | Declarations of interest amended |
| 26 May 2014 | Amended | Minor errors corrected. |
| 23 July 2013 | New citation required and conclusions have changed | The conclusion is now changed. |
| 17 April 2013 | New search has been performed | The text has been updated according to new literature.<br>Eight new trials adding an extra 4926 patients (an expansion of patients of 16%) have been included in the update.<br>An additional stratification according to which setting the glycaemic intervention is applied to has been added ('Glycaemic control initiated with surgical intervention').<br>Bias domains of blinding of outcome assessors and incomplete outcome data are now divided into objective and subjective outcomes.<br>The risk of bias for the effect estimate for the outcomes is now presented with the result of each outcome.<br>Trials are now divided into lower risk of bias and high risk of bias according to sequence generation and allocation concealment.<br>The information size estimated with the trial sequential analysis is now diversity-adjusted.<br>Meta-analysis of health-related quality of life is performed.<br>Appendix evaluating reporting bias of included trials is now included.<br>Appendix reporting on author survey is included. |
| 22 December 2011 | Amended | The data for retinopathy trials were corrected. This only results in minor changes. The risk of selective outcome reporting for some of the included trials was corrected. |
| 24 August 2011 | Amended | Originally, we published that there was firm evidence for a 10% relative risk reduction of the composite microvascular outcome for trials exclusively dealing with glycaemic control in the usual care setting. It is now changed into: Trial sequential analysis does not show firm evidence for a 10% relative risk reduction in the trial sequential analysis of the composite microvascular outcome for trials exclusively dealing with glycaemic control in the usual care setting. |

## SOURCES OF SUPPORT

### Internal sources

- Copenhagen Trial Unit, Rigshospitalet, Denmark.
- Cochrane Metabolic and Endocrine Disorders Group, Germany.

### External sources

- The Copenhagen Insulin and Metformin Therapy Group, Other.