Authors' Reply to Montastruc et al.: “Drug-Induced Hyperglycaemia and Diabetes”

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We thank Montastruc et al. [1] for their interest in our article [2]. We defined diabetes mellitus as new development of a hyperglycaemic state that meets any of the following criteria: a fasting plasma glucose level ≥ 126 mg/dL on two separate occasions, a random plasma glucose concentration ≥ 200 mg/dL, a plasma glucose concentration ≥ 200 mg/dL 2 h after a 75 g oral glucose load or a glycosylated haemoglobin (HbA_{1c}) level ≥ 6.5 % [3].

In our study, hyperglycaemia and prediabetes were defined as glucose levels that did not meet the criteria for diabetes but were too high to be considered normal. Patients were considered at an increased risk of developing drug-induced hyperglycaemia or prediabetes if they had predisposing factors for diabetes mellitus, such as sedentary lifestyle, body mass index ≥ 27 kg/m², impaired fasting glucose or glucose intolerance, family history of diabetes, history of vascular disease, history of gestational diabetes mellitus or at least one risk factor for metabolic syndrome.

Distinction between drugs inducing only a rise in glucose levels and those associated with diabetes is not usually possible—some drugs induce both hyperglycaemia and diabetes. Diabetes may develop after a hyperglycaemic state.

Our work was not a systematic review, and therefore we might have missed a few studies. We would like to believe

that our focus on papers published in English would have covered most articles from high-impact journals; however, expanding the search to include papers published in other languages, including French, would certainly have identified more relevant articles, such as the one by Chebane et al. [4], and should be the focus of future studies. Nonetheless, we would like to highlight that our study included all drugs, except glibenclamide, from the paper by Chebane et al. [4].

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Compliance with Ethical Standards

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Conflicts of interest Neila Fathallah, Raoudha Slim, Sofien Larif, Housseem Hmouda and Chaker Ben Salem have no conflicts of interest that are directly relevant to the content of this reply.

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