The GSPN-coordinated study previously received grants of $53.2 million from the National Heart, Lung and Blood Institute, $41.2 million from the National Institute of Diabetes and Digestive & Kidney Diseases, and $15 million from GlaxoSmithKline.

BARI 2D is comparing the effectiveness of various therapeutic regimens in reducing the number of deaths from CAD among type 2 diabetes. Investigators aim to determine whether aggressive drug therapy is more effective than or in combination with surgery. In type 2 diabetes, the body is unable to properly use insulin, a hormone needed to metabolize sugars. Such insulin resistance is a major risk factor for cardiovascular disease.

The study will answer two questions that are critical to type 2 diabetic patients with stable coronary artery disease. Under what circumstances is it best to undergo revascularization in addition to drug therapy? Which method of drug therapy is best at controlling glucose?

Patients will be followed for at least five years to assess mortality, heart attack, stroke and other clinical endpoints, including quantity of life and cost of treatment. They will be on strict risk-factor management to control obesity, lipids and high blood pressure.

Dry mouth more common in diabetes

Health professionals frequently ask patients with diabetes to monitor their saliva for "dry mouth." This symptom is typically blamed on the medications used to treat diabetes. Other medications may also contribute to dry mouth. Medications for antipsychotics, antidepressants, decongestants, and heart medicines may cause dry mouth, according to Dr. Paul A. Moore, a professor of medicine at the University of California, San Francisco.

"Both research and clinical experience suggest a relationship between diabetes and dry mouth," he said. "Further, the relationship between diabetes and dry mouth may provide diabetics with a tool to monitor their blood sugars."