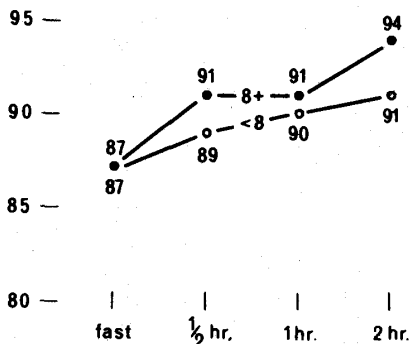


### BLOOD-GLUCOSE LEVELS AFTER CAFFEINE

SIR,—We have shown,<sup>1</sup> in a double-blind study, that the level of blood-glucose was significantly raised in relatively healthy males 2 hours after ingestion of 250 mg. caffeine (the equivalent of two cups of coffee). However, considerable blood-glucose-level variation was observed within the group. We here re-examine the sample in the light of the group health status.

Twenty-two junior dental students presented themselves fasting at 10 A.M. A venous blood-sample was obtained and blood-glucose measured.<sup>2 3</sup> Immediately after the blood was drawn, each subject was asked to swallow a capsule containing 250 mg. caffeine (*U.S.P.*) with 5 oz. (140 ml.) of water. Blood-glucose was measured  $\frac{1}{2}$ , 1, and 2 hours later. In addition, each student completed the Cornell Medical Index Health Questionary (C.M.I.). The total number of affirmative answers can be regarded as a crude measure of ill-health status.

1. Cheraskin, E., Ringsdorf, W. M., Jr., Setyaadmadia, A. T. S. H., Barrett, R. A. *Lancet*, 1967, i, 1299.
2. Nelson, N. *J. biol. Chem.* 1944, 153, 375.
3. Somogyi, M. *ibid.* 1945, 160, 69.



Effect of caffeine upon mean blood-glucose levels (in mg. per 100 ml., on ordinate) in ten subjects with less than 8, and twelve subjects with 8 or more, "yes" responses on C.M.I.

### Results and Discussion

The students were divided almost equally by the number of positive C.M.I. responses: ten students had C.M.I. scores of 0-7, and twelve had scores of 8-22. The means ( $\pm$  S.D.) for blood-glucose levels (see accompanying figure) were as follows:

Blood-glucose (mg. per 100 ml.)	C.M.I.	
	0-7 (no. = 10)	8-22 (no. = 12)
Fasting	87 $\pm$ 6	87 $\pm$ 8
1/2 hr.	89 $\pm$ 6	91 $\pm$ 7
1 hr.	90 $\pm$ 7	91 $\pm$ 6
2 hr.	91 $\pm$ 6	94 $\pm$ 8

It is clear that, on a mean basis, the blood-glucose values rise with time.

The statistical significance of caffeine supplementation upon blood-glucose concentration in terms of health status, considering fasting against post-caffeine levels, was as follows:

C.M.I.	Time after caffeine (hr.)		
	1/2	1	2
0-7 (no. = 10) . . . . .	> 0.400	> 0.200	> 0.100
8-22 (no. = 12) . . . . .	> 0.100	> 0.100	< 0.025*

\* Statistically significant.

The only significantly raised blood-glucose value occurred 2 hours after caffeine supplementation in the students with the poorer C.M.I. response (8 or more "yes" answers), and the hyperglycæmic effect of caffeine was greater than in those with fewer (0-7 "yes" answers) general symptoms and signs suggestive of disease.

Although the blood-glucose response to caffeine reported here is not of great magnitude, coffee-drinking habits are such that cumulative effects may occur during an average day. In addition, the peak glucose level may have occurred during a later hour. This would enhance the possibility of a cumulative response. Thus, as noted previously,<sup>1</sup> the effect of coffee consumption on glucose homœostasis should be carefully explored, since many heavy consumers may have a predisposition to maturity-onset diabetes. Danowski<sup>4</sup> has noted that roughly one out of four people, in the course of a lifetime, develops diabetes, or episodes of hyperglycæmia that are indistinguishable from diabetes. These observations were derived from consecutive studies of individuals from birth to death rather than from the prevalence-rate in a given community at a given time.

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