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PREVALENCE AND RISK FACTORS OF GASTROPARESIS-RELATED SYMPTOMS AMONG PATIENTS WITH TYPE 2 DIABETES

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Background: The prevalence of gastroparesis in type 2 diabetes mellitus (T2DM) varies widely. Our aim is to estimate the prevalence of clinical symptoms of gastroparesis among patients with type 2 diabetes mellitus and explore the relationship between gastroparesis and other risk factors.

Methods: A cross-sectional study evaluating 147 type 2 diabetics using the gastroparesis cardinal symptoms index (GCSI). A GCSI total score ≥1.90 were chosen as having definite symptoms of gastroparesis. All patients completed a demographic questionnaire and interviewed to complete the demographic data. Disease duration, medication, comorbidities, recent blood glucose and HbA1C were collected and investigated.

Results: The prevalence of clinical symptoms of gastroparesis among type 2 diabetics was 10.8%. Clinical symptoms of gastroparesis were significantly correlated to HbA1c (p=0.001), blood glucose (p=0.003), duration of diabetes (p=0.02) and comorbidities (p=0.009). The most common symptoms were bloating, stomach fullness and early satiety (63.94%, 55.1% and 48.3% respectively). In logistic regression analysis, female gender emerged as significant independent predictors of the presence of at least one symptom.

Conclusions: The prevalence of clinical symptoms of gastroparesis observed in the Saudi patients diagnosed with type 2 diabetes was 10.8% and is independently associated with poor controlled diabetes, hyperglycemia, and long duration of diabetes and history of co-morbid conditions.

PERCEPTION OF ORAL ANTIDIABETIC AGENTS ADVERSE EVENTS AND THEIR IMPACT ON HEALTH RELATED QUALITY OF LIFE IN TYPE 2 DIABETIC PATIENTS

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Currently, drug therapy with oral antidiabetic agents, is capable of inducing normoglycemia levels able to decrease the risk of complications associated with diabetes mellitus. However, it is also known that the various existing oral antidiabetic agents may trigger a large number of adverse events, either alone or in combination. Some of these tolerability and security issues related to the oral antidiabetic are reported by patients and can influence negatively or satisfaction with treatment or glycemic control, or the therapeutic adherence and maintenance. It is therefore, very important the role of patients in monitoring of adverse events related to the use of the oral antidiabetic drugs in order to optimize treatment and improve the quality of life of patients with type 2 diabetes (DM2). The aim of this study is to determine the prevalence of adverse events associated with the use of oral anti-diabetics and assessing their impact on health-related quality of life (HRQoL) of diabetic patients tracked in primary health care. A total of 357 DM2 patients were enrolled in observational and cross-sectional study, recruited in six Health Care Centers and Family Health Units (FHU) of the central region of Portugal. The data collection comprises three questionnaires to measure the prevalence of adverse events, the diabetes health profile (DHP-18) and EQ-5D-3L. The results show that the highest prevalence of adverse events is in the dipeptidyl peptidase-4 inhibitors followed by metformin+sitagliptin (fixe dose) and metformin+vildagliptin (fixe dose) therapeutic classes. We also found that all the correlations between different variables are statistically significant (p<0.001). Thus, we conclude that patients who show greater number of adverse events tend to have poorer health profile, worse general health and also lower health related quality of life.

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Page 56