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REVERSE THE DAMAGE OF DIABETIC NEPHROPATHY USING THE MOST POTENT ACTIVE NATURAL PEPTIDES

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Retina is one of the most sensitive organs in our body that is almost affected in most of the chronic disease as diabetes mellitus, hypertension, dyslipidemia, autoimmune diseases (SLE, sclerosis and amyloidosis), chronic infectious diseases (TB – Meningitis), and wide variety of gene defects and genetic disorders. Epidemiology - As an example for the real depth of the problem we will show some figures about the prevalence of degenerative retinal diseases from three different categories of patients. The first category is the genetic malformations that affect the retina. Retinitis pigmentosa and the related rod-cone and cone-rod dystrophies represent the majority of the disorders that lead to diminished and eventually loss of vision. The term retinitis pigmentosa represents a set of adverse reactions to a broad category of genetic disease. More than 190 genetic malformations can lead to primary photoreceptor abnormalities, some affect the rods first and cones later or the reverse. The prevalence of primary photoreceptor degeneration is in the range of 1:300-1:5000 and the carrier state is approximately 1:100. In other type of degenerative retinal diseases, Diabetic retinopathy, we find the number of cases of Diabetic retinopathy in the USA rise from 4.06 million in year 2000 to 7.69 million in 2010 and expected to be doubled by 2050. CMDA Retino: CMDA Retino is a combination of essential peptides of low molecular weight (CMDA Retino MW< 300 k dalton). These essential peptides are the ultra filtrates of organ specific cells derived from sheep fetus. CMDA Retino design was based on the specific peptides that are related to the general and specific components of the retina and the visual pathway to help the patient restore vision, colors, field and perception. CMDA retino is designed to deal with the following diseases: Retinal degeneration due to congenital disease including retinitis pigmentosa; age related retinopathy; diabetic retinopathy; hypertensive retinopathy; autoimmune diseases complicated by retinal deg

DIETARY INFLAMMATORY INDEX AND ODDS OF GESTATIONAL DIABETES MELLITUS IN A CASE-CONTROL STUDY FROM IRAN

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The possible relationship between diet-related inflammation and the risk of gestational diabetes mellitus (GDM) requires further investigation, especially in non-Western populations. We examined the association between dietary inflammatory index (DII) scores and GDM in a case-control study conducted in Iran. This study included 122 GDM cases and 266 controls hospitalized for acute non-neoplastic diseases. Cases were pregnant women aged 18-40 years, who visited major general hospitals in different regions of Tehran. Pregnant women were screened for gestational diabetes between the 24th and 28th week of gestation with a 50 g, 1 h glucose challenge test (GCT). Cases diagnosed positive for GDM. Controls were pregnant women who had normal GCT tests. DII scores were computed from dietary intake assessed by a previously validated 147-item food frequency questionnaire. Logistic regression models adjusted age, gestational age, energy, exercise, BMI, smoking exposure, family history of diabetes, and history of multivitamin intake were used to estimate odds ratios (ORs) and 95% confidence intervals (CI). Subjects with higher DII scores (i.e., indicating a more pro-inflammatory diet) had a higher odds of GDM with the DII being used as both a continuous (OR=1.20; 95% CI=0.94-1.54) and as categorical (OR $_{tertile 3vsl}=2.10; 95\%$ CI=1.02-4.34, P-trend=0.03). These results indicate that a pro-inflammatory diet, as evidenced by higher DII scores, is associated with increased odds of GDM among Iranian women.