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The importance of non-stop treatment after delivery for pregnant women with diabetes

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Aim: There are no reports of long follow-up studies of women with diabetes after delivery. We analyzed cases we treated for over 20 years up to 50 years, while continuing treatment after deliveries, to investigate the relationship between blood glucose control and diabetic complications.

Method: Materials are a total 128 deliveries, 112 cases. They are divided in four groups: Treated for over 50 years, 40~49 years, 30~39 years and 20~29 years. The number of cases in which treatment was continued for over 50 years is 1 case, between 40 and 49 years is 13 deliveries (11 cases), from 30 to 39 years is 32 deliveries (26 cases) and between 20 and 29 years is 82 deliveries (79 cases). The ratio of the type of diabetes is one case (0.9 %) in slow progressive IDDM, 44 cases (39.3 %) in type-1 diabetes and 66 cases (58.9 %) in type-2 diabetes. Their present age in these four groups is 77, 72.3, 63.3, 54.4 years old, respectively. The relationship between HbA1c and diabetic retinopathy and nephropathy in last visit was observed.

Result: Their average hemoglobin A1c (HbA1c) level at last visit are 8.2%, 7.4%, 7.5% and 8.2%, respectively. Despite elevated HbA1c levels are not so good; they had few complications; no retinopathy 40%, simple retinopathy 40% and photocoagulation 20% related to nephropathy, no albuminuria 86.7% and albuminuria 9.4%.

Conclusion: We confirmed that even if glycemic control is not ideal, non-stop treatment is effective to prevent diabetic complications, in conjunction with strict monitoring of blood glucose, education and early detection of diabetes.

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