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Study o. possible relation between maternal serum resistin and insulin resistance in patients with pre-eclampsia

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Introduction: In humans resistin antagonizes the effects of insulin on glucose metabolism in liver and skeletal muscle, interacts with and reinforces inflammatory pathways and may promote endothelial cell activation. Increased resistin levels have been associated with obesity, insulin resistance, metabolic syndrome, type. diabetes and increased cardiovascular risk

Objectives: Our study. aimed to investigate the utility of maternal serum resistin in women with preeclampsia compared to normal pregnant women and. its. relation. to. insulin resistance.

Methods: The study was conducted on ninety (90) females,divided into two groups:- Group I: Pre-eclampsia (n=60) and Group II: Health. pregnant Control (n=30),All individuals were subjected to the following after an informed oral and written consent: Full history taking, clinical examination with special emphasis o. edema, blood pressure measurement and Maternal body mass index (BMI); Index (weight (kg). height² (m²)), Determination of gestational age according to the date of the last menstrual period and confirmed by first trimester ultrasound. Laboratory investigations includingCBC, AST, ALT, BUN, creatinine,HOMA-IR and serum resistin.

Results: Statistical comparison between pre-eclamptic patient. (Group I), and the healthy control group (Group II) regarding the different studied parameters revealed. highly statistically significant increase in the patients group than the control group regarding SBP, DBP, BMI, CRE, AST, ALT, 50. oral glucose challenge test (GCT), FBG, fasting insulin, HOMAIR and resistin. On the contrary, there was. highly statistically significant decrease in the patients group than the control group regarding HB.

Conclusion: In this study it was found that elevated serum resistin levels could be associated with exaggerated insulin resistance in patients with preeclampsia. Further studies are needed to clarify the role of resistin in the patho-physiology of preeclampsia and insulin resistance

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Flexible heel cast for the management of diabetic foot ulcer:A case study

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Around 10% of people with diabetes will develop. foot ulcer which may lead to amputation. Heel ulcers are common particularly in patients who are non-ambulant. Traditionally, pressure relief at the heel has been. problematic issue. Current solutions centre on the use of specialist mattresses or free floating the heels using. number of commercially available devices. Patient's concordance to wear these devices is often affected by patients reporting the devices as uncomfortable and restrictive to wear in bed. Additionally, they only achieve off-loading when the patient is non-ambulant. Flexible heel casts are an innovative way to prevent and to treat pressure ulcers on the heel. This case study describes the use of. flexible heel cast in an 82 year old type. diabetic patient. The heel ulcer had been present for more than six months and had become static.. flexible heel cast management strategy was implemented. The heel ulcer was resolved after three weeks. Flexible heels casts have been evaluated as an alternative pressure relieving device that accommodates both aims of prevention and management of pressure ulcers on the heels. As such flexible heel casts can be used as an alternative to current off-loading devices for the heels and are an excellent addition to the clinician's toolkit.

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