

MICROANGIOPATHIC COMPLICATIONS IN LATENT AUTOIMMUNE DIABETES IN ADULTS (LADA) - RELATIONSHIP WITH THYROID AUTOIMMUNITY

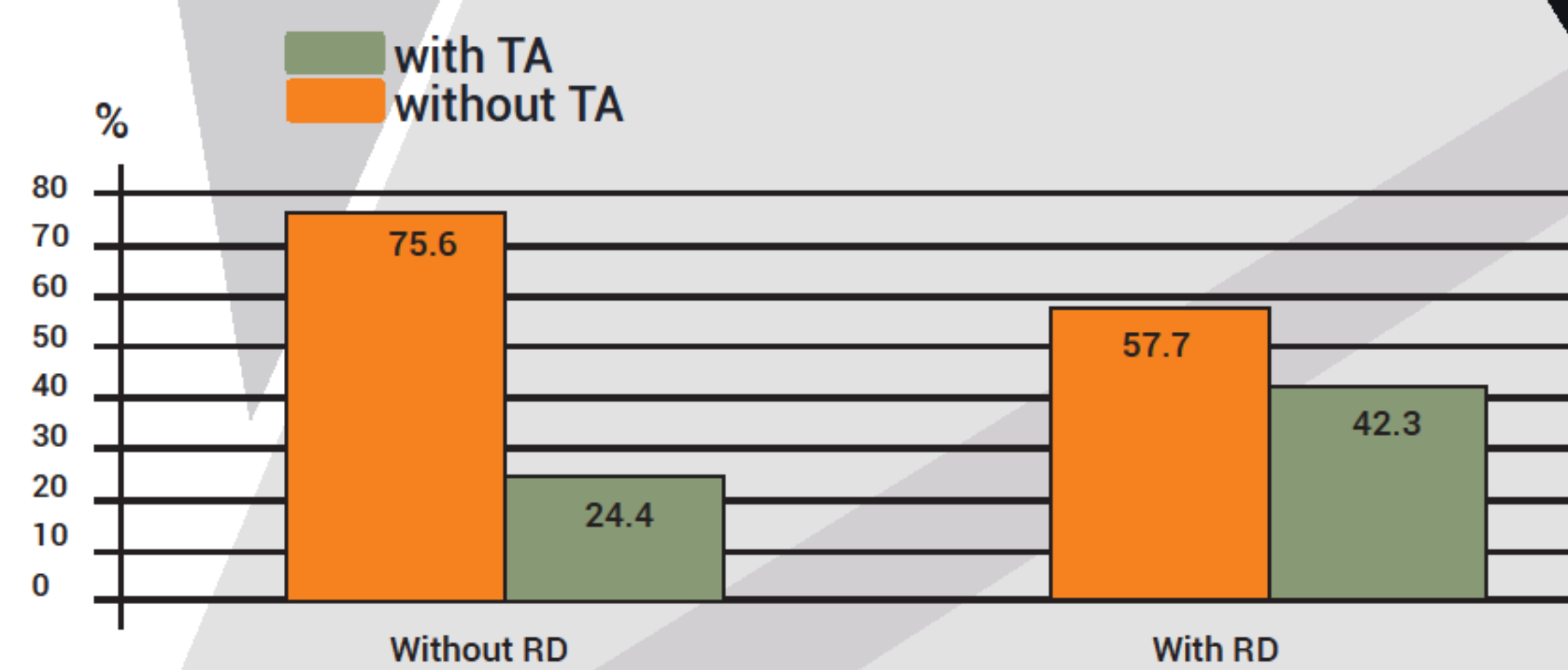
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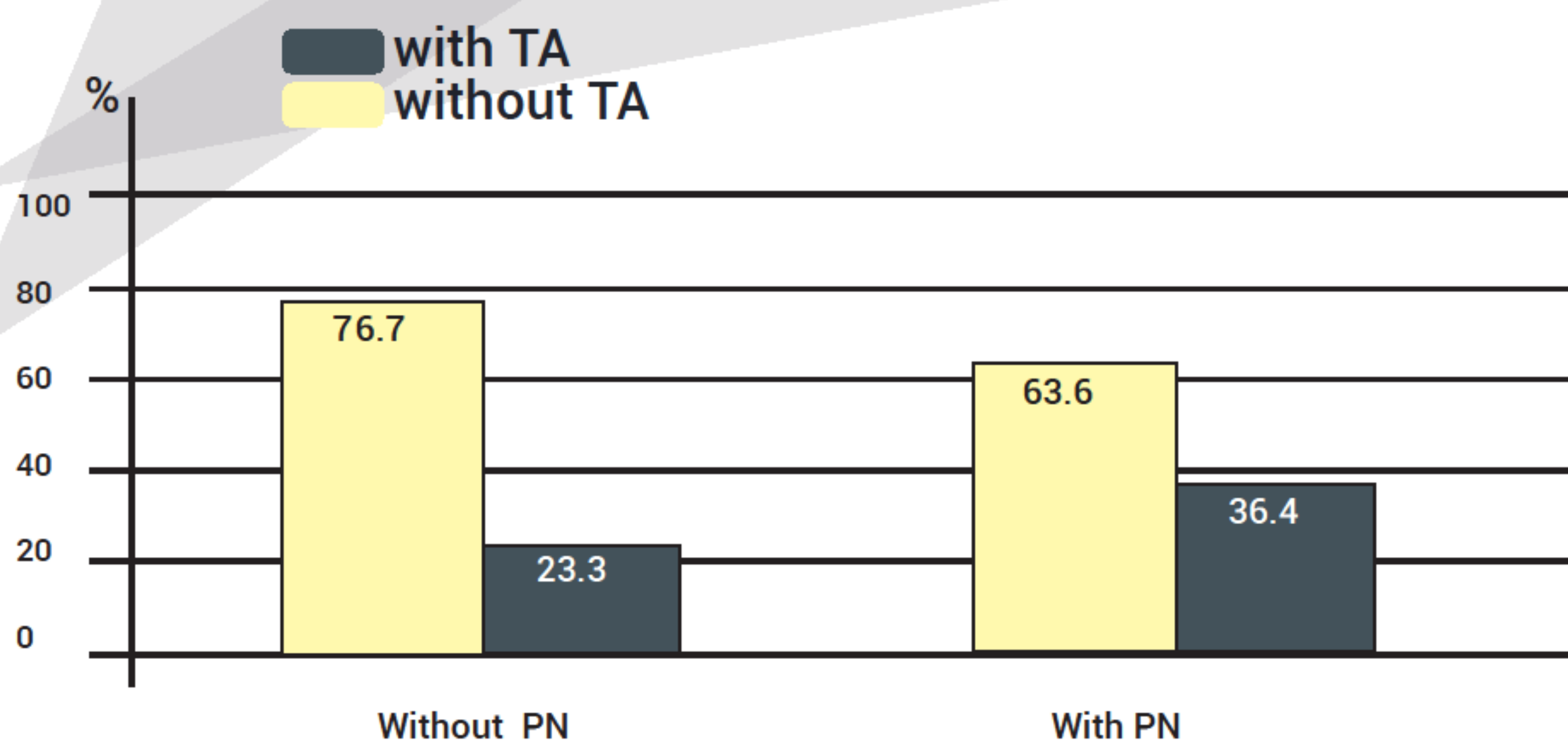
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RESULTS

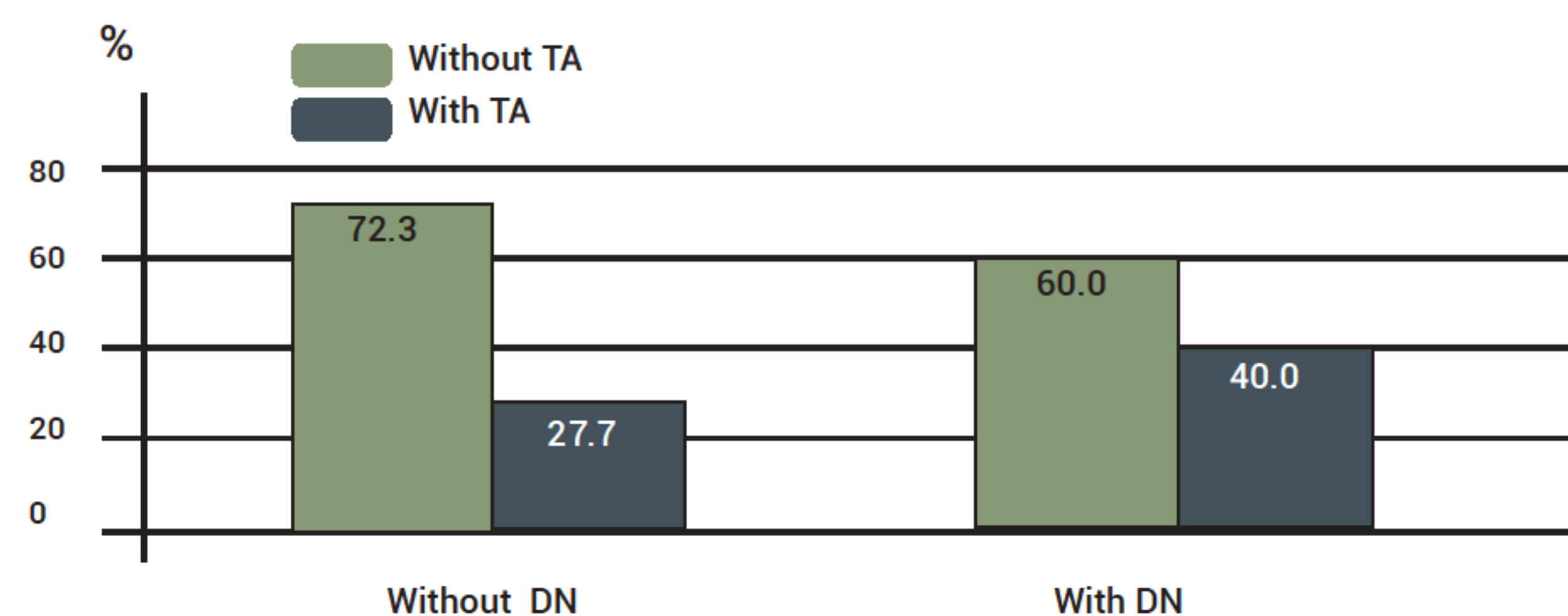
Patients with TA had twice the risk of RD compared to patients without TA, odds ratios 2.27 (95% CI 0.8 la 5.7), p=0.004.



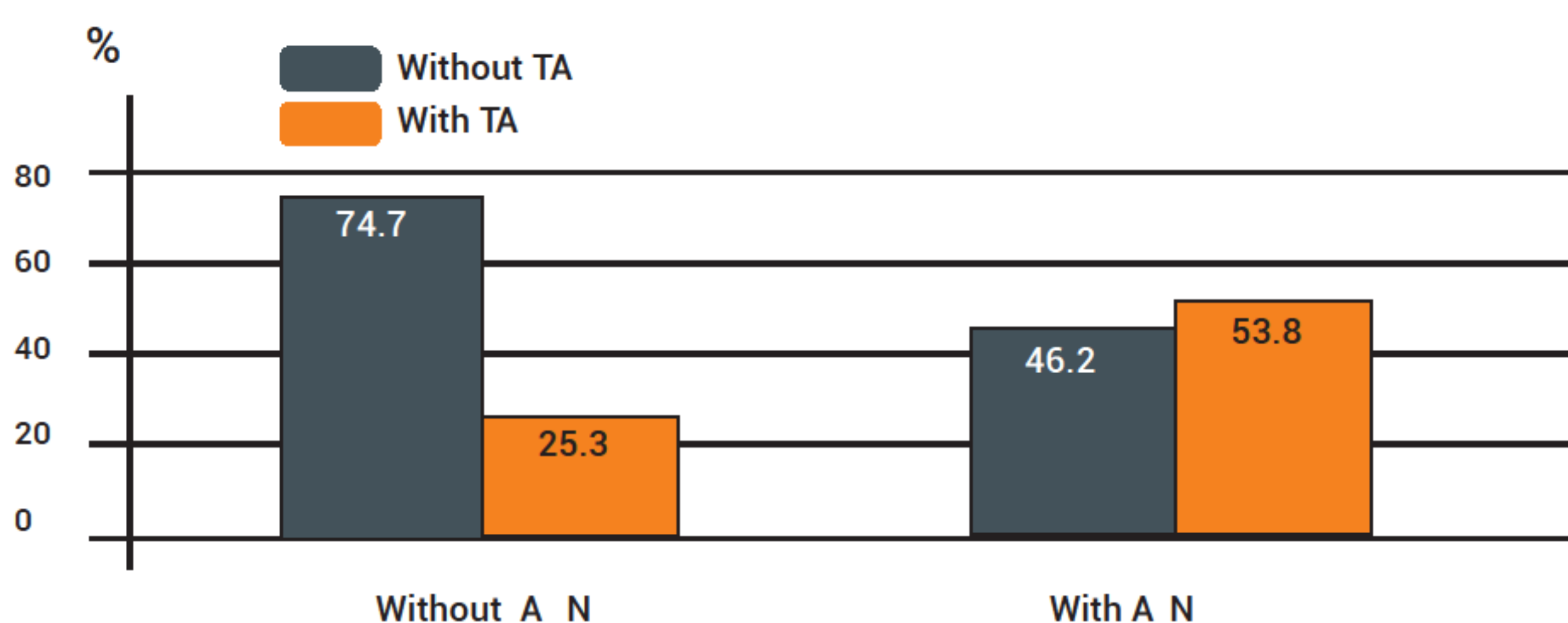
The risk of NP was 1.8 times higher in patients with TA compared with patients without TA (95% CI 0.7 la 4.4; p=0.04).



From 10 patients with DN, 4 of them (40%) had TA compared to 26 patients (27.7%) of 94 without DN. Patients with TA had the probability to develop this complication 1.74 times higher than those without TA, odds ratio 1.74 (95% CI 0.4 la 6.6, p=0.46).



Patients with TA are three times more likely to develop AN than patients without TA, odds ratio 3.4 (95% CI 1 la 11, p=0.014).



Conclusions:

Except diabetic nephropathy, the presence of thyroid autoimmunity in patients with LADA has determined a significantly higher prevalence of microangiopathic complications.

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Background:

Patients with LADA are a clinically, immunologically, genetically heterogeneous group and the presence of thyroid autoimmunity (TA) appears to contribute to his heterogeneity.

Aim:

The aim was to evaluate the impact of thyroid autoimmunity on microangiopathic complications in LADA patients.

Material and method:

LADA has been defined by the onset of diabetes at ages above 30 years, the lack of need for insulin therapy for at least 6 months after its first appearance, the presence of anti GAD antibodies (GADA). Positive titers of TPOAb (anti-thyroid peroxidase antibodies) were observed in 30 (28.8%) out of 104 LADA patients. Prevalence of retinopathy (DR), peripheral neuropathy (PN), autonomic neuropathy (AN) and diabetic nephropathy (DN) were also evaluated.

Conclusions:

Except diabetic nephropathy, the presence of thyroid autoimmunity in patients with LADA has determined a significantly higher prevalence of microangiopathic complications.

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