

CLINICAL CHARACTERISTICS IN PATIENTS WITH TYPE 2 DIABETES MELLITUS: A COHORT STUDY

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OBJETIVES

Type 2 diabetes mellitus (T2DM) is a chronic disease that has increased both its prevalence and incidence in the last 50 years and is an independent risk factor for macrovascular and microvascular disease. The aim of the study is to analyze the grade of metabolic control, cardiovascular risk factors and treatments in T2DM cohort of patients.

METHODS

Observational, cross-sectional and prospective study of 238 T2DM patients who consult in endocrinology clinics for the first time or those who did not undergo periodic revisions during the previous year of the study. All reported patients were outpatients, over 18 years of age and they signed informed consent. Patients with other types of diabetes or inpatients were excluded. Period of the study: from November 2013 to January 2014. We measured the goals of control in diabetic patients, the prevalence of chronic complications and the used treatment. Statistical analysis was done by SPSS 20.0.

RESULTS

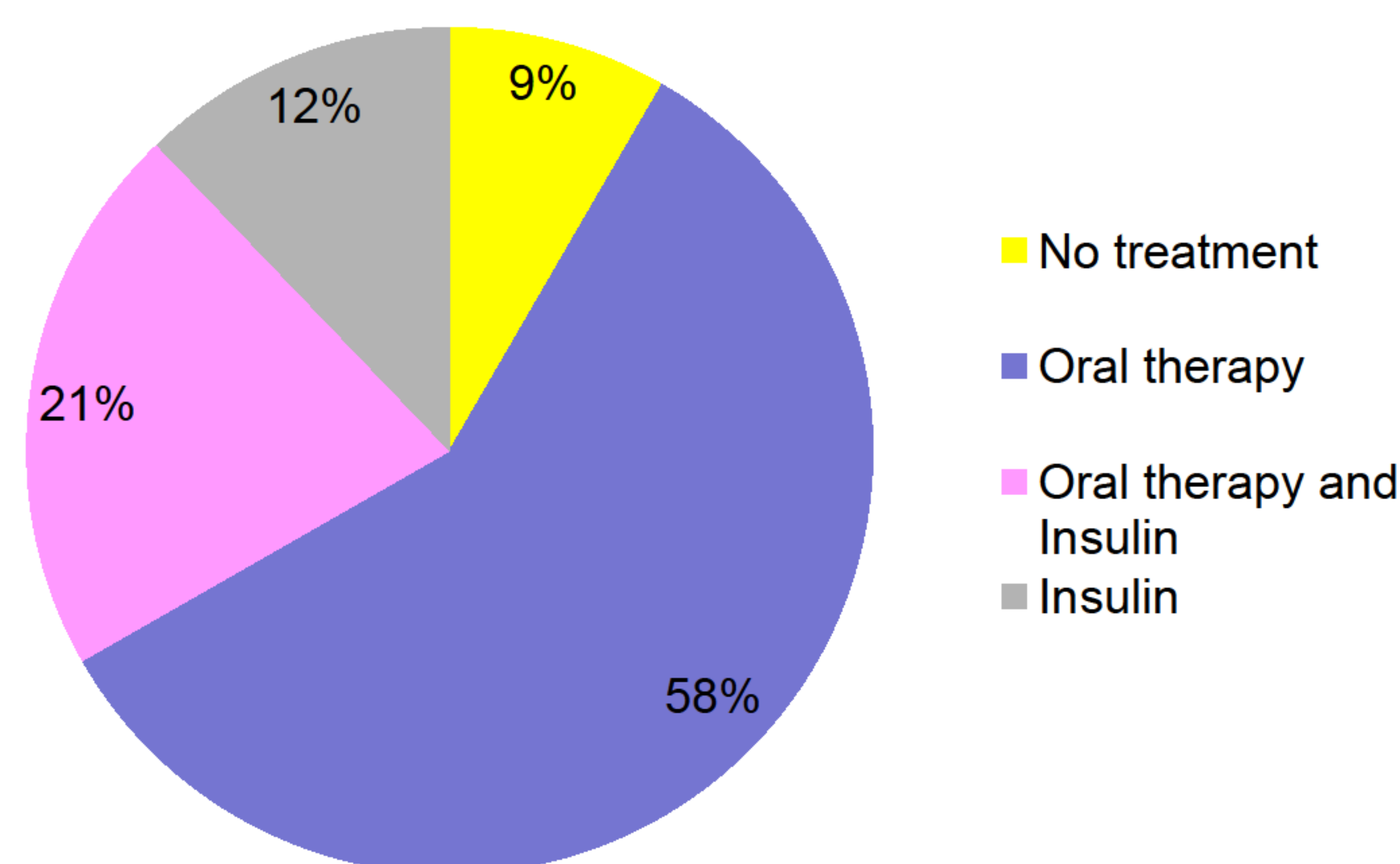
The study was composed by 61.8% men and 38.2% woman with a mean age of 64.2±12.7 years. Diabetes duration: < 1 year 8.8%; 1-5 years 20.2%; 5-10 years 25.2%; > 10 years 45.8%. Cardiovascular risk factors: hypertension 80.7%, dyslipidemia 80.3%, smoking 18.9% and obesity 61.4% (body mass index 33.4±8.2 kg/m²); waist perimeter 109.6±16.2 cm. HbA1c, lipids, blood pressure level and degree of control are shown in table 1. Neither of patients achieved all of targets. Hypoglycaemic agent are shown in graphic 1. Antihypertensive drugs 74.8%; lipid lowering drugs 64.3%; antiplatelet agents 41.1%. No ocular fundus examination (12 months previous): 65.1%. Normal 24.4%; mild diabetic retinopathy (DR) 3.4%; moderate DR 3.4%; severe DR 0.8%; proliferative DR 4.6%; macular edema 3.8%. Microalbumin-to-creatinine ratio test (6 months previous) 50.4% (normal 29.4%; microalbuminuria 16.4%; macroalbuminuria 4.6%). The prevalence of cerebral, peripheral and coronary vascular disease was 5.9%, 10.1% and 18.5% respectively. The prevalence of amputation was 2.9% and diabetic food 5.1%.

Table 1. HbA1c, lipids, blood pressure level, and degree of control

	Mean ± sd	Targets (ADA 2013-2014)	% patients achieved targets
HbA1c (%)	8.1 ±1.9	≤7	37.3
LDL-c (mg/dl)	109.6±43.0	≤100	44.8
HDL-c (mg/dl)	42.3±10.9	≥50	21.7
Triglycerides (mg/dl)	169.2±116.0	≤150	53.4
Systolic BP (mmHg)	140.1±21.6	≤130	36.3
Dyastolic BP (mmHg)	77.4±12.7	≤80	64.5

30.3% and 24.7% of patients have not HbA1c and lipids tests respectively during the 6 months preceding the study.

Graphic 1. Hypoglycaemic agents



CONCLUSIONS

- The prevalence of cardiovascular risk factors was very high in our study. However, neither patients achieved all ADA targets, in spite of the wide use of antihypertensive, lipid lowering and hypoglycaemic drugs.
- The screening of complications was not optimal in our study.

