



RESULTS

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INTRODUCTION

✓In Uzbekistan, the number of patients with diabetes mellitus (DM) in the past 10 years is annually increasing by 8%.
 ✓According to the National Center for Endocrinology, in the republic about 130,000 patients with diabetes, but according to the CIS Executive Committee not less than 2% of the population of Central Asia suffer from diabetes.
 ✓Uzbekistan has a population of about 30 million people, the actual number of diabetic patients is at least 6 times higher and according to international experts of WHO is not less than 800 000 (it is expected that by 2030 this number will exceed 1.5 million)
 ✓The actual number of people with disabilities due to diabetic retinopathy (DR) - more than 30 000 people.

OBJECTIVE

To study the structure of disability due to ocular complications of diabetes, and the efficiency of medical care for such patients

METHODS

Block 1

➤Was carried out copying of 347 examination acts of persons, whose disability was the result of ophthalmic complications of diabetes, in Tashkent for 10 years
 ➤Age of patients varied from 18 to 76.
 ➤Males - 59% (205 people), women - 41% (142 people)
 ➤Ratio of disabled suffering type I and type II diabetes was 13% and 87% respectively

Block 2

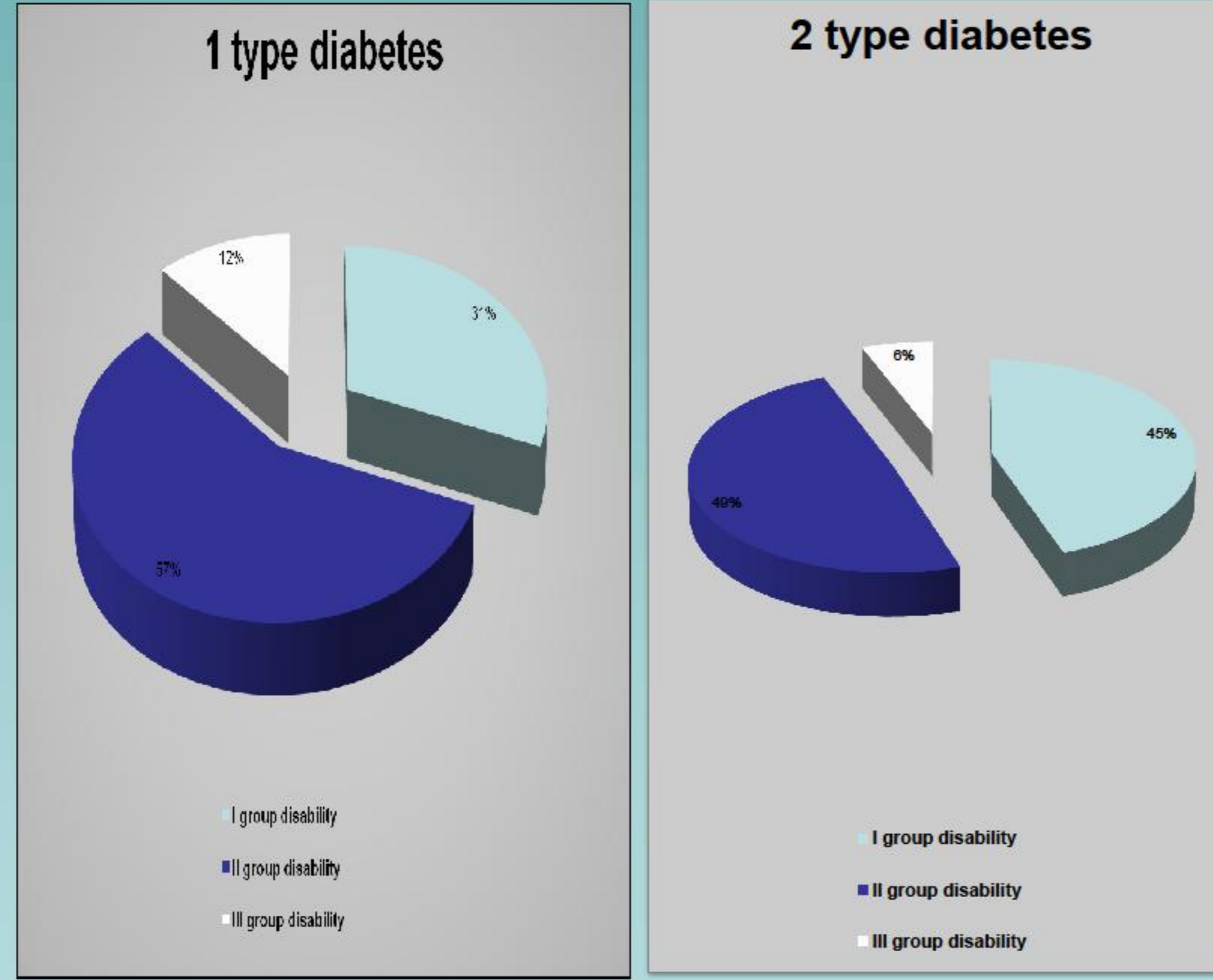
➤Carried out was a survey - questionnaire of 711 doctors from 72 family health centers in Tashkent city
 ➤Group of respondents were general practitioners (82,8%), endocrinologists (9,6%) and ophthalmologists (7,6%)
 ➤154 patients with diabetic retinopathy
 ➤89 patients were residents of Tashkent, 65 people - from other regions of the country

RESULTS

Clinical and epidemiological characteristics of disability due to ocular complications in the different types of diabetes

Disability due to ophthalmic complications of diabetes and its dynamics for 2003-2012 in Tashkent were analysed.
 More than 94% of surveyed persons were defined as 1st (66%) and 2nd (29%) degree disabled, which indicates severe disability of patients.
 Regardless of the type of diabetes more than 1/3 of cases at the primary examination were defined as group 1 disability.

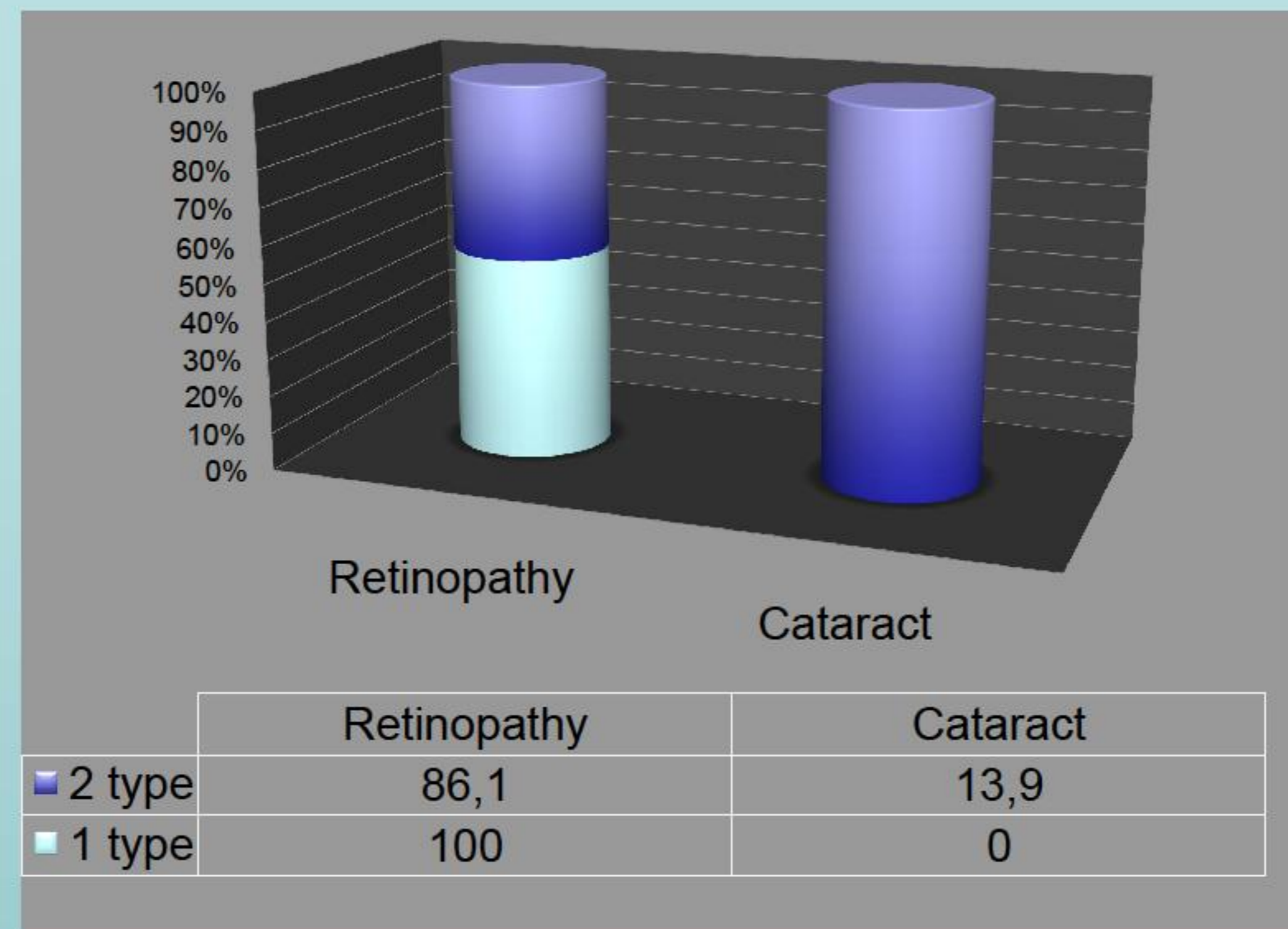
Ratio of disability by groups depending on type of diabetes.



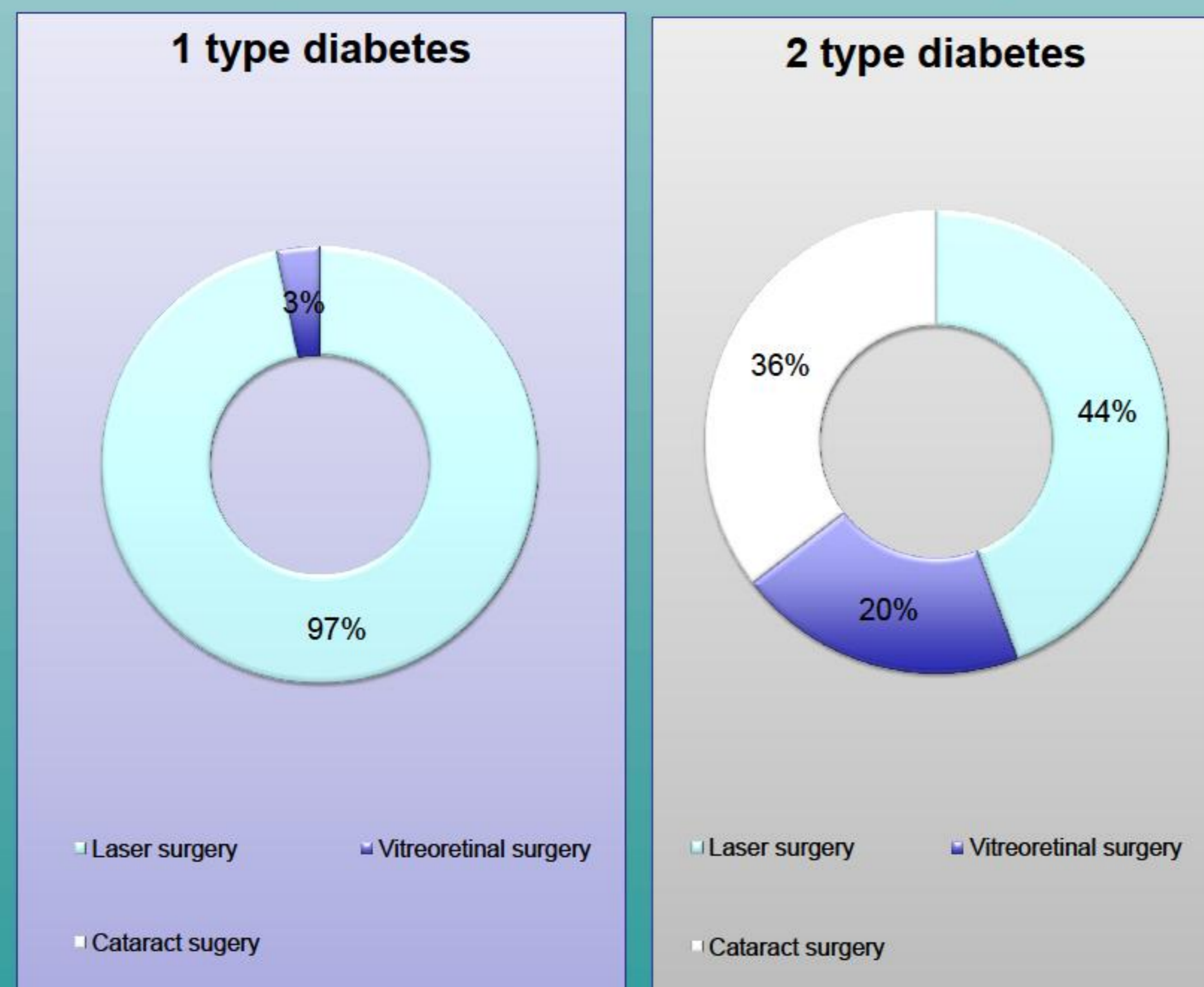
Leading disabling pathology of the organ of vision in both types of diabetes has been the DR, but laser photocoagulation was performed in less than half the of cases.

In some cases where a vitrectomy was performed, in history of the treatment there was no laser coagulation of the retina.

Leading disabling pathology



Types of treatment received by patients prior to the indication of disability



The results of the survey of physicians in family clinics in Tashkent.

The studied issue	GPs	Endocrinologists	Ophthalmologists
In newly diagnosed diabetes, examination by an ophthalmologist is performed:	34,8%	78,7%	89,9%
✓immediately	43,5%	15,9%	9,6%
✓in case of complaints	21,7%	5,4%	0,5%
✓during routine clinical examination			
What should be a regularity of examination in patients with diabetes:	45,1%	17,7%	12,8%
✓annually	35,1%	23,8%	21,1%
✓every 6 months	19,8%	58,5%	66,1%
✓set by ophthalmologist			
When a patient is seeking care for a significant disorders of the visual organ it's a result of:			
✓patient's lack of awareness	21,8%	43,3%	49,5%
✓not referring to the directions of the physician	78,2%	56,7%	50,5%
What are the methods of treatment and prevention of DR that you recommend to patients?			
✓medicamental	78,8%	45,4%	23,2%
✓laser surgery	16,3%	45%	58,4%
✓vitreoretinal surgery	4,9%	9,6%	18,4%

CONCLUSION

□Among persons suffering from type 1 diabetes number of disabled persons of group II is predominant, in patients with type 2 diabetes – share of disabled groups I and II is approximately the same. This can be explained with detection of type 1 diabetes at an early age, when children are under more dense medical control, which allows to prevent the development of complications.
 □A study in our city revealed insufficient coverage of treatment and prevention in patients with ophthalmic complications of diabetes, which is evidenced by high percentage of persons with disability groups I and II, as well as the low percentage of patients who underwent laser coagulation of the retina and vitreoretinal surgery.
 □Effective monitoring of the status of patients with diabetes and its complications requires coordinated work of GPs, together with a team of specialists (diabetologists, nutritionists, opticians, nephrologists and neurologists, etc.).

REFERENCES

Dreval A.V. Treatment of diabetes and related diseases. Moscow: EKSMO, 2010.
 King H., Aubert R. E., Herman W. H. Global burden of diabetes, 1995-2025: prevalence, numerical estimates, and projections: Diabetes Care, 1998, Volume 21, N. 9.
 Skorobogatova E.S. Disability on vision due to diabetes. Moscow: Medicine, 2003.
 Sidikov Z.U. Achievements and problems in ophthalmic service of the republic of Uzbekistan: Organization and management of health care, 2012, N. 10.
 Turakulov Ya.H. Epidemiology and prevention of diabetes and its complications in Uzbekistan: Medical Journal of Uzbekistan, 1996, N. 5.