Effect of nutrition follow up in diabetes urban population to understand the glycemic control for a period of 6 months

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Aim: Effect of nutrition follow up in diabetes urban population to understand the glycemic control for a period of 6 months.

Background: Diabetes mellitus is reaching potentially epidemic proportions in India. The level of morbidity and mortality due to diabetes and its potential complications are enormous, and pose significant healthcare burdens on both families and society. Worryingly, diabetes is now being shown to be associated with a spectrum of complications and to be occurring at a relatively younger age within the country. Type 2 diabetes is a slowly progressive disease, in which the gradual deterioration of glucose tolerance is associated with the progressive decrease in β-cell function. Managing type 2 diabetes in the elderly population is difficult because of complex co-morbid medical issues and the generally lower functional status of elderly patients.

Sample Size: 165 Subjects were enrolled initially but as the services have recently started only 91 patients (52.5 years ± 13.3 Years) had 6 months follow up data.

Methods: Subjects with established diabetes, who came for the first time in an urban clinic had detailed dietary history taken and examination performed. Body Mass Index (BMI), waist circumference, HbA1c, Cholesterol, HDL and Triglyceride was measured in all subjects during the first visit and after completing 6months. Nutrition Follow up was done through personalized consultation and subjects even attended Diabetes Expert Education Program to learn about diabetes management including 3 triads of Diabetes (Diet, Physical Activity and Medications). Monthly all the subjects were remotely called by nutritionist for diet follow up.

Results & Discussion: At 6 months there was significant (p<0.00001) reduction in HbA1c from 9.3±1.9% to 7.7±1.4%. There were no difference in cholesterol, triglycerides, HDL, body weight and waist circumference at this time. 27 subjects had very good control (HbA1c<7.0) whereas 64 had suboptimal control (HbA1c>7.0). Those subjects who had good control had shorter duration of diabetes than those with suboptimal control. There was no difference in weight at the beginning and at 6 months in either group despite improved Hba1c.

Conclusion: These findings suggest that in a significant proportion of type 2 diabetic patients, subjects with good control had shorter duration (newly deducted) of diabetes but there was no difference in weight with good control. Newly diagnosed type 2 diabetes can successfully lay a foundation for prolonged good glycemic control when compared with longer duration of diabetes. Further follow ups and research with larger population needs to be conducted.

Biography
Tara Murali is a Post-Graduate in Clinical Nutrition and Dietetics and Master in Business Administration. She is also a Critical Care Specialist in Nutrition. She comes with a vast experience of 20 years in the Department of Nutrition and Dietetics in Mallya Hospital, Bangalore. She has participated in multiple National level seminars and presented papers on Clinical Nutrition. She is an active Life member of Indian Dietetic Association and is actively involved in NABH activities.

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