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Factors associated with glycemic control among type-2 diabetes mellitus (T2DM) patients attending clinics at Suva health centers, Fiji in 2011-2016: A mixed method study**Masoud Mohammadnezhad, Pablo Cabrelá Romakín, Donald Wilson and Sabiha Khan**
Fiji National University, Fiji

Background & Objective: Diabetes, a global health emergency, is the number one cause of morbidity and mortality in Fiji. Despite advancement in diabetes management, a lot of diabetics in Fiji are still suffering from preventable complications and dying prematurely. This study is conducted to determine poor glycemic control proportion and its associated factors among T2DM adults attending clinics at Suva health centres in 2011-2016.

Methodology: This quantitative study was conducted at three Suva health centres on sample size of 338 adult T2DM patients registered on August 1, 2011-August 1, 2017 for the quantitative study and 18 health care workers working at the same diabetes clinics purposively selected for three focus group discussions. Data analysis included logistic regression analysis using SPSS version 22.0. P-value less than 0.05 was considered as the significant level.

Result: Out of the 338 participants, 261 (77.2%) had poor glycemic control (HbA1C<7%). Patients had a mean age of 56 years, 59% were female, mean duration of diabetes was 4.7 years, 23.7% were treated with insulin and 70.7% were in overweight and obese categories. Patients who had poor RBS (AO =7.43, 95% CI: 2.46-22.45) and poor FBS (AOR=9.76, CI: 3.11-30.58) had high odds of poor glycemic control.

Conclusion: Majority of patients had poor glycemic control. Patients with poor random and fasting blood sugars were likely to have poor glycemic control. Regular RBS monitoring could be a cost-effective way of monitoring glycemic control in the absence of HbA1C testing.

masraqo@hotmail.com