



25th Global Obesity Meeting

April 17-18, 2023 | Rome, Italy

Speakers

Title: Predictors of microalbuminuria and its relationship with glycemic control among Type 2 diabetic patients of Jazan Armed Forces Hospital, southwestern Saudi Arabia

Hassan Ali Abdelwahid¹, Hesham Mohamed Dahlan²

^{1,2} Jazan Armed Forces Hospital, KSA

Received Date: 2023-01-06 Accepted Date: 2023-01-08 Published Date: 2023-04-23

Statement of the Problem: Diabetic kidney disease (DKD) is highly prevalent among patients with diabetes mellitus. It affects approximately 20% of diabetic patients. The objectives of the present work were to assess patterns of albuminuria and determine microalbuminuria predictors among patients living with type 2 diabetes (T2D) who attended the family medicine department of Jazan Armed Forces Hospital.

Methodology & Theoretical Orientation: The study participants were screened for albuminuria and classified into three categories or grades, A1, A2 and A3, based on the urine albumin/creatinine ratio (ACR). Category A1 included T2D with normal to mildly increased albuminuria (ACR <30 mg/gm; n, 532). The second category, A2, included those with microalbuminuria with ACR of 30-300 mg/gm; n, 202. The 3rd one, A3, was severely increased albuminuria with an ACR of >300 mg/gm; n, 30. A case-control design was used and included two groups (n, 202/group), one with microalbuminuria and the other with a normal urine (ACR). Data regarding patient history, glycosylated hemoglobin (HbA1c), lipid profile, renal function tests, ACR, ASCVD (atherosclerotic cardiovascular disease) risk, etc., were collected.

Findings: The prevalence rates of microalbuminuria and macroalbuminuria were 26.4% and 3.9%, respectively. HbA1c was significantly higher in patients with microalbuminuria (9.3 ± 2.2 ; $P < 0.001$) and macroalbuminuria (10.5 ± 2.3 ; $P < 0.001$) than in those with normal ACR ($8.3 \pm 1.9\%$). The predictors of microalbuminuria were poor glycemic control with HbA1c $\geq 7\%$ {OR, 2.5 (95% C. I, 1.5-4.2)}; hypertension {OR, 1.8 (95% C. I, 1.2-2.8)}; estimated glomerular filtration rate (eGFR) of <90 mL/min/1.73 m² {OR, 2.2 (95% C. I, 1.4-3.6)}; smoking {OR, 1.3 (95% C. I, 0.7-2.6)}; and body mass index {OR, 1.05 (95% C. I, 1.01-1.09)}.

Conclusion & Significance: Microalbuminuria is highly prevalent among patients with type 2 diabetes and is associated with poor glycemic control and hypertension, necessitating aggressive and timely screening and treatment.

Biography

Professor Doctor Hassan Ali Abdelwahid, Professor of Family Medicine, Suez Canal University. has completed his MD (Medical doctorate) in 2002. Egypt. Dr. Hassan also is a consultant of family medicine in Jazan Armed Forces Hospital (JAFH), Saudi Arabia. He is interested in management of chronic diseases, ECG, anemia, Epidemiology, Health education, research, and adult learning. Doctor Hassan is the Head of Institutional Research Board of JAFH. He is serving as a member of the faculty research committee, and as an editorial member or reviewer of several reputed journals like Elite Research Journal, International Blood Research & Reviews, American Journal of Clinical Medicine Research (<http://www.sciepub.com/journal/AJCMR>), American Journal of Public Health Research, British J. of Medicine and medical research