OA-D-22

QUALITY OF CARE STUDY ON THE MANAGEMENT OF PATIENTS WITH DIABETIC FOOT ULCERS IN A TERTIARY HOSPITAL FROM 2013 TO 2017

https://doi.org/10.15605/jafes.034.02.S40

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INTRODUCTION

Diabetic foot ulcers are among the leading causes of morbidity and mortality in patients with diabetes. This study aims to assess the management of diabetic foot ulcers in the last five years and compare it with the standard guideline of care.

METHODOLOGY

This is a retrospective cohort study. A total of 267 charts of patients with diabetic foot ulcers were reviewed from 2013 to 2017.

RESULTS

The mean age of the patients was 57.31 years, while their mean HbA1c was 10.39%. The average duration of diabetes among the patients was 7.54 years. 41.95% of all patients received surgical intervention. The average number of days of hospital stay is 18.96 days. 14.61% of the total admission had adverse clinical outcomes during their hospital stay. The most common of which were hospital acquired pneumonia and acute coronary syndrome. The mortality rate in this study is 13.11%. The most common causes of death were acute coronary syndrome, septic shock secondary to infected wound and septic shock secondary to hospital acquired pneumonia.

CONCLUSION

The results of this study revealed the gravity of foot ulcers among patients with diabetes. Improvement in the management of diabetic foot ulcers should be continued.

KEY WORDS

diabetes, foot, ulcer

OA-D-23

EFFECT OF 32 GRAM RESISTANT STARCH SNACK ON GLUCAGON LEVEL OF OBESE PATIENTS WITH DM TYPE 2

https://doi.org/10.15605/jafes.034.02.S41

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INTRODUCTION

Glucagon plays a role in the pathophysiology of hyperglycemia in patients with type 2 Diabetes (DM). The characteristic of nutritional therapy for patients with type 2DM is using the resistant starch. This study was aimed to determine the influence of administration of 32 g snack made from resistant starch on glucagon level.

METHODOLOGY

This was a angle-arm before and after clinical trial design conducted among 21 obese patients with type 2DM attending endocrine clinic at RSUD Sarjito. The fasting glucagon levels were evaluated before and one hour after the administration of resistant starch.

RESULTS

Mean fasting glucose before and after snack with resistant starch were 203.18 \pm 132 and 201.64 pg/mL \pm 33.84 pg/mL respectively. There was no significant difference in the fasting glucagon (p=0.170). Thirty-eight patients had a decrease in fasting glucose (11.92 pg/mL and 9.5 pg/mL respectively). The administration of resistant starch was very weakly correlated with the decrease in fasting glucagon (r=0.174)

CONCLUSION

There was no change in plasma glucagon level with administration of 32 gram snack made from resistant starch

KEY WORDS

type 2 diabetes, glucagon, resistant starch