

Dobrá glykemická kompenzácia a spokojnosť so životom u starých pacientov s druhým typom diabetes mellitus?

Good glycaemic compensation and satisfaction with life in patients with type 2 diabetes mellitus

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Cieľ:

The aim of this study was the analysis of satisfaction with life (SWL) in patients with type 2 diabetes mellitus (T2DM) and the association of SWL with basic sociodemographic, clinical and biochemical parameters.

Súbor a metodika:

The study involved 204 probands hospitalized and the Internal Department, Specialized Regional Hospital in Sanok (108 men and 96 women) with average age $69,7 \pm 11,7$ years in the range 40 – 91 years. The known duration of disease was $11,0 \pm 7,7$ years. More than two thirds (69.1 %) of the patients were treated with insulin and the remaining with different combination of oral hypoglycaemic agents.

For subsequent analysis the probands were divided into three groups as follows: A: 40 – 60 B: 61 – 80 years and C: older than 80 years.

Satisfaction with life was evaluated with a standardized questionnaire, where 1 is full satisfaction and 7 is the lack of satisfaction with own life. An additional questionnaire consisting of 37 questions evaluated the basic sociodemographic, anthropometric and clinical data of the patients. The objective data included body mass index, waist-to hip ratio, waist circumference, blood pressure, blood glucose and HbA1c, basic parameters of lipid metabolism, hematological parameters, serum creatinine and urea concentration.

Výsledky:

The average results of SWL were in the middle of the scale ($3,19 \pm 1,51$) but the results were dispersed in the whole range from 1 – 7 points. These relatively good results were in contrast with the opinion of probands about their overall health status because 90,7 % of them declared it as deteriorated and only 9,3 % as unchanged. We did not find any difference in SWL between female and male probands. (3,12 vs 3,26) but the the average SWL of the 37 oldest probands was significantly better than the average SWL of the younger probands.

The level of compensation was assessed according to the HbA1c levels and by the calculation of HGI, HGI is the ratio between blood glucose and HbA1c Correlation analysis did not show any association between HbA1c and SWL and between HGI and SWL but the age of the 18 patients with good compensation was significantly higher as compared with the other three groups of patients divided according to the level of compensation ($p = 0,0015$;).

Záver (aj v anglickom jazyku):

From the results of SWL scale analysis and the assessment of glycemc compensation it looked at the first sight that T2DM patients older than 80 years form a special group of patients with better SWL life and also with good glycemc compensation. However, before drawing any far-reaching conclusion and interpreting the results in the context of “oldest old theory” we carried out analysis of some possible confounding factors influencing our results.

Missing HbA1c values in a considerable number of patients.

Higher prevalence of anemia in older patients. According to our opinion this factor could not affect the HbA1c results substantially.

The difference in the age of onset of diabetes between the oldest younger (groups A, B) Later onset of manifest diabetes can be caused by less severe metabolic disturbance as in the case of manifestation around 40 – 60 years of age.
