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Are our obese, diabetic patients controlled properly?

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Background & Aim: To analyse the profile of degree of control of HbA1c, blood pressure and cholesterol of obese, diabetic patients in primary health care.

Method: A descriptive, transversal study of obese, diabetic patients treated at an urban primary medical health centre. To diagnose obesity, a BMI $IMC > 30$ was used. To ensure a correct control, the values recommended by the ADA 2015 were used (blood pressure < 140 mmHg and < 90 mmHg, LDL < 100 mg/dl, HbA1c $< 7\%$). Averages were used for quantitative variables and percentages for qualitative variables.

Results: 40 subjects were analysed with an average age of 68.73 ± 11.2 years, mainly male (57.5%), glomerular filtration of 57.6 ± 7.3 and a BMI of 33.53 ± 3.56 ; the average LDL was 94.4 ± 27.8 mm/dl, HDL de 43.95 ± 9.2 mm/dl, triglycerides of 133.1 ± 59.9 mm/dl and HbA1c $7.4\% \pm 1.8$. The average BMI was 33.49 ± 4.5 . 17.5% were smokers. 70% controlled their blood pressure correctly; 74.4% their HbA1c; 70% their LDL, and 72.5% their level of triglycerides 72.5%. 82.5% used statins, 72.5% used oral anti-diabetic medicine (mainly Metformin - 65%, DPP4 inhibitors - 37.5%, Repaglinide - 10%, GLP1 - 75%, and sulphonylureas - 5%) and 25% used insulin. 27.5% had some type of complication, mainly peripheral arterial disease (12.5%), coronary disease (10%) and ictus (7.5%).

Conclusions: The profile of an obese, diabetic patient is one of a 68 year old male, non-smoker, treated with Metformin. 25% of patients have some complication. The degree to which blood pressure, lipids and HbA1c is controlled can be considered to be good according to international indicators. Most require pharmacological treatment in order to achieve the recommended control figures.