

## PS1.025

### Diabetes mellitus type 2: control and complications

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**Objective:** To study in diabetic patients the degree of control and diabetic complications in primary care.

Workplace: Urban health center

**Material and Methods:** - Design: longitudinal descriptive study (2012-2015). - Subjects: patients with DM2 assigned to a primary care quota (n=212) - Variables: age, sex, years of diabetes evolution, biannual and annual ocular fundus (OF) (normal, non-proliferative diabetic retinopathy (DR), proliferative DR), annual examination of the feet (normal, risk, diabetic), HbA1c, LDL-cholesterol, microalbuminuria and good control criteria ( $HbA1c \leq 7\%$ ,  $LDL \leq 100\text{mg/dL}$  and  $\text{microalbuminuria} \leq 30\text{mg}$ ). - Analysis: descriptive using proportions, means and IC95% ( $p \leq 0,05$ ).

**Results:** the mean time of evolution of diabetes is  $8.44 \pm 0.39$  years. The average annual value of HbA1c increased from  $7.08 \pm 0.09\%$  in 2012 to  $6.86 \pm 0.08\%$  in 2015 in the first. 62.4% of patients have made two determinations of LDL in 2015 with an average value of  $96.71 \pm 2,31\text{mg/dl}$  in the final determination. The best percentage of patients with  $LDL\text{-cholesterol} \leq 100\text{mg/dl}$  was obtained in 2014 (68.8%). Regarding microalbuminuria, it notes that 60.1% of individuals have two annual determinations in 2015 (positive in 16.3% and 12.9%). In 2015, microalbuminuria is negative in 59.3% to the patients with positive microalbuminuria in 2012. The OF and the examination of the feet were 65.1% and 86.3% in 2013, respectively. 22.2% non-proliferative RD in 2012 became proliferative RD in 2015 and the foot risk increases of 32.4% in 2012 to 48.3% in 2015.

**Conclusions:** at the end of the study, HbA1c and LDL levels of 2015 decreased compared to 2012 and microalbuminuria tends to become negative, while a progressive deterioration of the feet appeared and the severity of retinopathy increased in a significant percentage of patients.