Dysfunction Diabetic Patients Have a High Prevalence of Sexual Dysfunction

Index of Erectile Function (IIEF) questionnaires were used to evaluate sexual dysfunction mostly type 2 diabetes. Research finding out the effectiveness of angiotensin- converting enzyme inhibitor (ACEI) for reducing microalbuminuria incident in type 2 diabetic patient with normoalbuminuria have been published. This evidence based case report (EBOR) will show the search and critical appraisal of those studies.

Methods: The search of evidence was done in Pubmed and Cochrane Library database using keywords. After applying inclusion and exclusion criteria, filtering doubles, reading abstract and looking for full text availability; there were two remaining journals which were appraised based on standardized British Medical Journal criteria of validity, importance, and applicability.

Results: Of the two meta-analysis, Article written by Hirst JA et al. is valid, important, and applicative for patient’s case. Meanwhile, article written by Vejakama P et al. is valid, but not important and applicative because of studies’ heterogeneity.

Conclusions: ACEI reduced microalbuminuria incident by 16% significantly over placebo for type 2 diabetic patients with normoalbuminuria.

Relationship Between ACE Insertion/Deletion Genotype, Telomere Length and Diabetes Mellitus Type II

Diabetic nephropathy is found in 20%-40% of diabetic patients who are mostly type 2 diabetes. Research finding out the effectiveness of angiotensin- converting enzyme inhibitor (ACEI) for reducing microalbuminuria incident in type 2 diabetic patient with normoalbuminuria have been published. This evidence based case report (EBOR) will show the search and critical appraisal of those studies.

Methods: The search of evidence was done in Pubmed and Cochrane Library database using keywords. After applying inclusion and exclusion criteria, filtering doubles, reading abstract and looking for full text availability; there were two remaining journals which were appraised based on standardized British Medical Journal criteria of validity, importance, and applicability.

Results: Of the two meta-analysis, Article written by Hirst JA et al. is valid, important, and applicative for patient’s case. Meanwhile, article written by Vejakama P et al. is valid, but not important and applicative because of studies’ heterogeneity.

Conclusions: ACEI reduced microalbuminuria incident by 16% significantly over placebo for type 2 diabetic patients with normoalbuminuria.

Angiotensin-Converting Enzyme Inhibitor for Prevention of Microalbuminuria in Type 2 Diabetes

Background: Diabetic nephropathy is found in 20%-40% of diabetic patients who are mostly type 2 diabetes. Research finding out the effectiveness of angiotensin- converting enzyme inhibitor (ACEI) for reducing microalbuminuria incident in type 2 diabetic patient with normoalbuminuria have been published. This evidence based case report (EBOR) will show the search and critical appraisal of those studies.

Methods: The search of evidence was done in Pubmed and Cochrane Library database using keywords. After applying inclusion and exclusion criteria, filtering doubles, reading abstract and looking for full text availability; there were two remaining journals which were appraised based on standardized British Medical Journal criteria of validity, importance, and applicability.

Results: Of the two meta-analysis, Article written by Hirst JA et al. is valid, important, and applicative for patient’s case. Meanwhile, article written by Vejakama P et al. is valid, but not important and applicative because of studies’ heterogeneity.

Conclusions: ACEI reduced microalbuminuria incident by 16% significantly over placebo for type 2 diabetic patients with normoalbuminuria.

Diabetic Patients Have a High Prevalence of Sexual Dysfunction

Background: Sexual dysfunction can impact a person’s ability to form or sustain intimate relationships and co morbidity between sexual dysfunction and anxiety as well as depression has been reported. Yet epidemiological, etiological, and health associations in female patients are more frequent than male patients respectively. The participants were composed of 164 females aged between 18-74 years and 186 males aged between 19- 100 years. In this study was conducted at the outpatient diabetic clinic of Kenyatta National Hospital.

Methods: To determine the prevalence, types of sexual dysfunction and their socio demographic correlate in diabetic patients. Descriptive cross-sectional study The study was conducted at the outpatient diabetic clinic of Kenyatta National Hospital.

Results: This is the main referral hospital in Kenya. A total of 350 participants were enrolled in the study. The Female Sexual Function Index (FSFI) and the International Index of Erectile Function (IIEF) questionnaires were used to evaluate sexual dysfunction in female and male patients respectively. The participants were composed of 164 females aged between 18-74 years and 186 males aged between 19- 100 years. In this study was conducted at the outpatient diabetic clinic of Kenyatta National Hospital.

Results: This is the main referral hospital in Kenya. A total of 350 participants were enrolled in the study. The Female Sexual Function Index (FSFI) and the International Index of Erectile Function (IIEF) questionnaires were used to evaluate sexual dysfunction in female and male patients respectively. The participants were composed of 164 females aged between 18-74 years and 186 males aged between 19- 100 years. In this study was conducted at the outpatient diabetic clinic of Kenyatta National Hospital.

Conclusions: Sexual dysfunction can impact a person’s ability to form or sustain intimate relationships and co morbidity between sexual dysfunction and anxiety as well as depression has been reported. Yet epidemiological, etiological, and health associations in female and male patients respectively. The participants were composed of 164 females aged between 18-74 years and 186 males aged between 19- 100 years. In this study was conducted at the outpatient diabetic clinic of Kenyatta National Hospital.

Relationship Between ACE Insertion/Deletion Genotype, Telomere Length and Diabetes Mellitus Type II

Relationship Between ACE Insertion/Deletion Genotype, Telomere Length and Diabetes Mellitus Type II

Background: Telomere length has been used as a surrogate biomarker for biological aging. Chronic diseases, i.e. Type 2 Diabetes mellitus (DMT2), resulting in inflammation have been reported to shorten telomere length. The deletion allele of the angiotensin-converting enzyme (ACE) gene insertion/deletion (I/D) polymorphism has been associated with inflammation and susceptibility to atherosclerosis. Multivariate linear regression was used to determine the relationship between telomere length and ACE I/D genotype, covariates controlled for diabetic status.

Methods: Total population data demonstrated ACE DD or ID genotype carriers have longer mean LTL (1.091 and 1.095, respectively) than II genotype carriers (1.061, P=0.036). When stratified on the basis of diabetes or no diabetes, a significant increase in LTL was maintained in control subjects, but not in the DMT2 subjects. In control subjects, mean relative LTL for DD plus ID carriers is 1.090 and II carriers is 1.043 (P=0.009). In DMT2 patients, the mean relative LTL of samples carrying at least one D allele is 1.089 and II genotype carriers is 1.083 (P=0.068). In control but not DMT2 patients, female gender is associated with longer relative LTL (1.103, P=0.001).

Conclusions: The II genotype is associated with shorter telomere length in a control population, but this association is lost in DMT2 patients. These findings support a hypothesis that ACE DD or ID genotype increases telomere length but that diabetes mellitus status alters this effect.

Growing and Declining Numbers of Persons with Diabetes on Continuous Subcutaneous Insulin Infusion

Background: Since the year 1978 continuous subcutaneous insulin infusion (CSI) became the best near-physiological way of insulin substitution. The purpose of this study was to answer these questions: 1) how many persons have been put on an insulin pump since 1995 2) how many of them rejected the insulin pump 3) how many of them were switched to another kind of treatment 4) how many of CSI-treated patients died.

Methods: The study was carried out in a diabetes center in the course of 18 years (1995-2012). Various types of insulin pumps were applied and upgraded shortly beyond the date of their 48-month expiration period. The indications for CSII were decided according to the center's policy.

Results: A total of 580 patients (aged 11-78 years, 481 treated for T1DM and 99 persons for T2DM) were put on insulin pump in our center (n = 532) or referred with a pump to our center from a children's department (n = 48) at their age of 18 years.

Conclusions: Growing numbers of persons with diabetes type 1 and type 2 put on insulin pumps demonstrate increasing motivation of patients in recent technology for diabetes treatment.