

Achieving glycaemic control in patients with diabetes on hemodialysis *Shah P; Connolly M; Knott A; Ledson T; Srinivas-Shankar U Wirral University Teaching Hospital*

Aims: Optimising glycaemic control in patients with end stage renal disease on haemodialysis can be a challenge. The aim of this study was to determine the treatment modalities in use to achieve optimal glycaemic control in these patients.

Methods: This was a cross-sectional observational study of patients with diabetes on haemodialysis at a University Teaching Hospital. Data collected included baseline characteristics, type and duration of diabetes, baseline biochemistry, treatment modality for diabetes and glycaemic control.

Results: 55/137 {40.1%, n (%)} patients undergoing haemodialysis had diabetes. Data was available for 48 patients {mean age (SD), 64.3 (\pm 13.1) years}. 39 (81.3%) patients had Type 2 diabetes. Mean duration of diabetes was 19.6 (\pm 10.2) years. Body mass index was 29.3 (\pm 6.2) with 30 (66.6%) patients being either overweight or obese. HbA1c was 52.5 (\pm 17.6) mmols/mol and serum creatinine was 560 (\pm 229) (nr 59–104 μ mol/L). 14 (29.2%) patients were on diet-control alone. 25 (52.1%) patients were on insulin and 13/25 (46.4%) of these patients were on a basal bolus regimen. The total insulin dose was 36 (\pm 24) units. 9 (18.8%) patients were treated with oral hypoglycaemic agents (4 patients on sulfonylureas and 5 patients on dipeptidyl peptidase-4 inhibitors). Only 2 (4.2%) patients were on both insulin and OHA.

Conclusion: Despite the expanded armamentarium of therapeutic agents to treat diabetes, insulin remains the commonest treatment modality amongst patients with diabetes on haemodialysis.