Correlation between level of Haemoglobin A1C and Cardiac Diastolic Function in Type 1 DM and without overt Heart disease

Thesis

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دراسة العلاقة بين نسبة الهيموجلوبين السكرى والوظائف الانبساطية للقلب فى مرضى البول السكرى من النوع الأول والذين لا يعانون من أمراض قلبية صريحة

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Summary

Cardiovascular complications are the leading causes of mortality in type 1 DM. The severity of this problem is clearly illustrated by the finding that type 1 DM patients suffer from mortality rates many times higher than of the general population.

Diabetes increases the risk of heart failure both in men and women, the main etiological factors contributing to heart failure in diabetes are coronary artery disease, systemic hypertension and diabetic cardiomyopathy, in the same time poor glycemic control may be associated with an increased risk of heart failure among adult patients with diabetes.

Diabetic cardiomyopathy is a clinical condition in which ventricular dysfunction occurs independently of coronary artery disease and hypertension. It clinically manifests initially as asymptomatic diastolic dysfunction and then progresses to symptomatic heart failure. This work studied the relation between the degree of glycemic control in type 1 DM (by the assessment of level of HbA1c) and cardiac diastolic function. It included 50 subjects with type 1 DM with age ranged from 11 to 29 years and average diabetic duration of 7 years.

Cardiac function was assessed by Echocardiographic, Doppler and Tissue Doppler Imaging studies. The study showed that there is statistically significant difference between diabetic population and control group as regard Doppler A wave, E/A ratio, deceleration time and IVRT. Also there was statistically significant difference between the two groups as regard TDI of septal mitral flow with p value < .001 in septal and lateral (e') and p value < .0001 in septal and lateral E/e'.

There was a direct relationship between level of HbA1c and cardiac diastolic function with sensitivity of 92% and specificity of 75%.

Summary and Conclusion 🗷

The level of HbA1c was directly related to septal and lateral E/e' TDI of mitral flow and there was indirect relationship between HbA1c level and septal and lateral (e') TDI of mitral flow.

There was no significant correlation between duration of diabetes and Doppler and TDI findings in our study.

Conclusion

- More than 50% of Patients with Type 1 DM have impaired cardiac diastolic function with either conventional or TDI.
- Diastolic dysfunction in diabetic patients can be asymptomatic and can exist without systolic dysfunction.
- The Diabetic patients, who gave echocardiographic evidence of cardiac diastolic dysfunction, have poor glycemic control with HbA1c more than 7.45%.

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List of Contents

Title	Page
• Introduction and Aim of the work	1
• Review of Literature	
Diabetes Mellitus	5
Cardiac diastolic function	40
Patients and Methods	74
• Results	81
• Discussion	99
• Summary and Conclusion	108
• Recommendation	112
• References	113
• Appendix (master table)	156
• Arabic Summary	ſ

List of Tables

Table	Title	Page
Table 1:	Criteria for diagnosis of diabetes	11
Table 2:	Doppler echocardiographic patterns of LV	
	diastolic dysfunction	62
Table 3:	Parameters of Systolic and Diastolic Function by T	DI 66
Table 4:	Normal values of mitral inflow velocities and	
	time Intervals	67
Table 5:	Reference values of HbA1c level	77
Table 6:	Clinical Characteristics of Diabetics and Controls	81
Table 7:	Comparison of gender of control and diabetic grou	ıps 81
Table 8:	Comparison of M-mode LV ESD, EDD and IVS of	of
1	control and diabetic groups	82
Table 9:	Comparison of 2-D Echo Transverse Left Atrial	
	Diameters of control and diabetic groups	82

Table 10: Comparison of Doppler E, A waves and E/A ratio	
of control and diabetic groups	83
Table 11: Comparison of Doppler E wave deceleration time	
and IVRT of control and diabetic groups	84
Table 12: Comparison of TDI of septal mitral flow control	
and diabetic groups	86
Table 13: Comparison of TDI of lateral mitral flow between	
control and diabetic groups	87
Table 14: Comparison of duration of DM in DM groups	88
Table 15: Comparison of level of HbA1c between group	
of dm without DD and those with DD	89
Table 16: Area under the (ROC) Curve	90
Table 17: Cutoff point of HbA1C between Diabetics with	
and without Diastolic Dysfunction	90
Table 18: Correlation between level of HbA1c and duration	
of Diabetes with Doppler and TDI findings	91
Table 19: Comparison of M-mode LV EDD diameter between	
the diabetic groups	93

Table 20: Comparison between Doppler (E/A, IVRT and decelerated)	tion
time) in the group of DM without DD and group of	
DM with DD	93

Table 21: Comparison of TDI of septal mitral flow waves between the group of DM without DD and group of DM with DD 94

Table 22: Comparison of TDI of lateral mitral flow between the group of DM without DD and group of DM with DD 96

List of Figures

Figure	Title	Page
Figure 1:	Oxidative stress in diabetic hearts	37
Figure 2:	Cardiac cycle	44
Figure 3:	Schematic diagrams of the changes in mitral in	ıflow
i	n response to the transmitral pressure gradient	60
Figure 4:	Normal diastolic pattern and pattern of abnorm relaxation	al 62
Figure 5:	Doppler Evaluation of a Patient with Restricti	ve
LV Filling	g (trans-mitral and trans-pulmonary v.)	63
Figure 6:	Normal myocardial diastolic pattern and patter	rn
of abnorm	al myocardial relaxation by TDI	70
Figure 7:	DTI annular velocities and transmitral velocity	72
Figure 8:	Comparison of Doppler E, A waves and E/A	
	of diabetic group and control	83
Figure 9:	Comparison of E wave Deceleration time of	
bo	oth groups	84
Figure 10	: Comparison of IVRT of both groups	85

Figure 11: TDI septal (s, e', a' and E/e') in both groups	86
Figure 12: TDI lateral (s, e', a' and E/e') in both groups	87
Figure 13: Receiver operator characteristic curve (ROC)	
Curve of HbA1c	89
Figure 14: Correlation between level of HbA1c and	
septal e' of TDI of mitral flow	92
Figure 15: Correlation between level of HbA1c and septal	
E/e' of TDI of mitral flow	92
Figure 16: Comparison of TDI of septal mitral flow betwee	en
the Diabetic groups	95
Figure 17: Comparison of TDI of lateral mitral flow between	en
the Diabetic groups	97
Figure 18: TDI (patient no 35)	97
Figure 19: Doppler echo of (patient no 41)	98
Figure 20: TDI (patient no 49)	98

List of Abbreviations

A	lbbreviation	Title
•	2-h PG	2 hours post prandial Plasma Glucose.
•		2-Dimensional Echocardiography.
•		American Diabetes Association.
•		Advanced glycation end products.
•		Adenosine triphosphate.
•	AV	1 1
•	BP	
•		Coronary Artery Disease.
•	CHD	Coronary heart disease.
•	CML	Carboxymethyl lysine.
•	CMR	Cardiac Magnetic Resonance.
•	CVD	Cardiovascular diseases.
•	DCM	Diabetic cardiomyopathy.
•	DD	Diastolic dysfunction.
•	DHF	Diastolic heart failure.
•	DM	Diabetes Mellitus.
•	DN	Diabetic nephropathy.
•	DR	Diabetic retinopathy.
•		Deceleration time.
•	EASD	European Association for the Study
	of Diabetes.	
•		Electrocardiograph.
•		End Diastolic Diameter.
•		Ejection fraction.
•		End Systolic Diameter.
•		End-stage renal disease.
•	Fig	
•		Fasting Plasma Glucose.
•		Glycosylated Haemoglobin.
•	HDL	High density lipoprotein.

•	HF	Heart failure.
•	HTN	Hypertension.
•	IDDM	Insulin-Dependent diabetes
	mellitus.	
•	IFG	Impaired Fasting Glucose.
•	IGT	Impaired Glucose Tolerance.
•	IHD	
•	IVRT	Isovolumetric relaxation time.
•	IVS	Inter-ventricular Septum.
•	LA	Left atrium.
•	LAD	
•	LV	Left ventricle.
•	LV DD	Left ventricular Diastolic
	dysfunction.	
•	LVEF	Left ventricular ejection
	fraction.	
•	MI	Myocardial infarction.
•	MV	Mitral valve.
•	NIDDM	Non-Insulin-Dependent
	diabetes mellitus.	
•	PV	Pulmonary vein.
•	SBP	Systolic blood pressure.
•	SD	Standard deviation.
•	SR	Sarcoplasmic reticulum.
•	SV	Stroke volume.
•	T1DM	Type 1 Diabetes Mellitus.
•	T2DM	Type2 Diabetes Mellitus.
•	TDI	Tissue Doppler Image.
•	UKPDS	UK Prospective Diabetes Study.
•	WHO	World Health Organization.