

Ain Shams University Faculty of Medicine

The Relation between Diabetes-Related Distress and Glycemic Control

Thesis
Submitted for Partial Fulfillment of the M.Sc. Degree
in Internal Medicine

By Catherine George Kheir

M.B.B.CH Ain Shams University

Supervised by **Prof. Dr. Mohamed Saad Hamed**

Professor of Endocrinology Faculty of Medicine - Ain Shams University

Dr. Nesma Ali Ibrahim

Lecturer of Internal Medicine Faculty of Medicine - Ain Shams University

Dr. Hanan Mahmoud Ali

Lecturer of Internal Medicine Faculty of Medicine - Ain Shams University

Faculty of Medicine Ain Shams University 2019



First, thanks are all due to **God**, for Blessing this work until it has reached its end, as a part of his generous help throughout our life.

I would like to express my sincere gratitude and appreciation to **Prof. Dr. Mohamed Saad Hamed,** Professor of Endocrinology, Faculty of Medicine, Ain Shams University for his continuous guidance, valuable advice and support throughout the execution of this work it was a great honor to work with him.

I also express my deep thanks and gratitude to **Dr. Nesma Ali Ibrahim,** Lecturer of Internal Medicine, Faculty of Medicine, Ain Shams University, for her great support, encouragement, patience and help.

Also my deep thanks to **Dr. Hanan Mahmoud Ali** lecturer of Internal Medicine, Faculty of Medicine, Ain Shams University, for her great cooperation and generous help.

I can't forget to thank with all appreciation Prof. **Dr. Waleed Anwar Abd El-Mohsen,** Professor of International Medicine and Nephrology, for his support and help in this study.



Dedication

I cannot give a word to fulfill my deepest love and thanks to GOD for lighting me the way not only throughout this piece of work but also throughout my whole life and for all the countless gifts I have been offered. Of these gifts, those people who were assigned to give me a precious hand to be able to fulfill this thesis and thanking a lot my Parents and my Husband for their great care throughout my life.

Catherine George Kheir

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List of Abbreviations

Abbr. Full-term **ADA** American Diabetes Association **AGEs** Advanced Glycosylation End Products Acquired Immune Deficiency Syndrome **AIDS BDI-II** Beck Depression Inventory II **BMI Body Mass Index** Behavioral Risk Factor Surveillance System **BRFSS** Coronary Artery Disease **CAD** Cognitive Behavioral Therapy **CBT** DD Diabetes distress DDS Diabetes distress screening scale **CHD** : Coronary Heart Disease **DALYS** : Disability Adjusted Life Years **DAN** : Diabetic Autonomic Neuropathy DKA Diabetic Ketoacidosis \mathbf{DM} **Diabetes Mellitus DN** Diabetic Neuropathy **DPN** Diabetic Peripheral Neuropathy DR Diabetic Retinopathy **DSM-IV** Diagnostic And Statistical Manual Of Mental Disorders, Fourth Edition : Erectile Dysfunction ED **EPESE** Hispanic Established Population For Epidemiologic Study Of Elderly : Fasting Blood Sugar **FBS**

FPG: Fasting Plasma Glucose

GABA : Gamma-Aminobutyric Acid

GADA : Glutamic Acid Decarboxylase Auto-Antibodies

GDM : Getational Diabetes Mellitus

GFR : Glomerular Filtration Rate

HbA₁**c** : Hemoglobin A1C

HDL : High Density Lipoprotein

HHS : Hyperosmolar Hyperglycemic State

HIV : Human Immune Deficiency Virus

HPA : Hypothalamic-Pituitary-Adrenal

IADPSG: International Association of Diabetes and

Pregnancy Study Groups

ICA: Islet Cell Auto- Antibodies

ICD-10 : International Classification Of Diseases, Tenth

Revision

IDF : International Diabetes Federation

IFG: Impaired Fasting Glucose

IGT : Impaired Glucose Tolerance

Kg : Kilo Gram

LDL : Low Density Lipoprotein

MENA : Middle East and North Africa

MI : Myocardial Infarction

MODY : Maturity Onset Diabetes Of The Young

NHANES: National Health And Nutrition Examination

Survey

NHIS : National Health Interview Survey

NO : Nitric Oxide

OGTT : Oral Glucose Tolerance Test

PCOS : Polycystic Ovaries

PKC: Protein Kinase C

PSH : Post-Stroke Hyperglycemia

PVD : Peripheral Vascular Disease

SPSS: Statistical Package For Social Sciences

SU : Sulfonylurea

T2DM: Type 2 Diabetes Mellitus

Two-hour: Two Hour Postprandial Plasma Glucose

PGOr2hpp

U.S. : United States

UACR: Urinary Albumin Creatinine Ratio

UAER : Urinary Albumin Excretion Rate

UKPDS: United Kingdom Prospective Diabetes Study

USA : United States Of America

UTI : Urinary Tract Infection

VEGF: Vascular Endothelial Growth Factor

WHO: World Health Organizations

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ABSTRACT

Background: Diabetes Distress is the understandable sense of burden or defeat that may occasionally punctuate the diabetic patient life. Also, Diabetes distress (DD) refers to the unique, often hidden emotional burdens and worries that are part of the spectrum of patient experience when man-aging a severe demanding chronic disease like diabetes.

Objectives: is to assess the relationship between Diabetes-related distress (using a Diabetes Distress Screening Scale) and the glycemic control (using A1C) and inflammation (using hs-CRP) in diabetic patients.

Patients and Methods: This study is a cross sectional study which had been carried out in outpatient clinic of endocrinology department of El Agouza Police Hospital during the period between June 2017 to June 2018. The study was done on 350 Type2 Diabetic patients. BMI, Wist/Hip Ratio, Fasting blood glucose, Post prandial blood glucose, HbA1c,hs-CRP, Creatinin, BUN, SGPT and SGPT were done to the patients, also Diabetes Distress Screening Scale Questionnaire was completed by the patients.

Results: In this study we found that there is a highly significant positive relationship between HbA1c and both Fasting Blood Glucose and Post Prandial Blood Glucose. Also, There was a highly significant positive relationship between CRP and Fasting Blood Glucose while there was a non significant relationship between CRP and Post Prandial Blood Glucose. Fasting blood glucose and Post Prandial Blood Glucose showed a highly significant positive relationship with Total DDS score, Emotional burden and Physician related distress, and showed non significant relationship with Regimen related distress and interpersonal distress. As regard the relation between HbA1c and Total DDS score, there was a highly significant positive relationship between them and also highly significant positive relationship between HbA1c and Emotional burden and physician related distress, but there was non significant relation between HbA1c and Regimen related distress and interpersonal distress. There was highly significant positive relationship between CRP and Total DDS score and also emotional burden, and there was significant positive relationship between CRP and Regimen related distress, and non significant relation between CRP and physician related distress and interpersonal distress.

Conclusion: In this study 350 type 2 diabetic patients were included. 55 diabetic patients show moderate distress with a highly significant relationship with the glycemic control (HbA1c) and significant relationship with CRP. In this age and sex were non significant factors while duration of diabetes, BMI and Wist-hip ratio show significant relation with HbA1c which reflect the glycemic control.

Keywords: Diabetes Distress, Glycemic Control

Introduction

iabetes mellitus is a syndrome of chronic hyperglycemia due to relative / absolute insulin deficiency, resistance, or both (Gale & Anderson, 2009).

It's a chronic disease characterized by a deficit in β -cell mass and a failure of glucose homeostasis, resulting in a variety of severe complications and an overall shortened life expectancy. Insulin deficiency leads to an increase in the level of glucose in the blood, which itself causes symptoms and may be life threatening and, in the longer term, is associated with damage to blood vessels and nerves (**Gonez & Knight, 2010**).

Type 2 diabetes accounts for 90–95% of those with diabetes, referred to as non–insulin-dependent diabetes, type 2 diabetes, or adult onset diabetes, encompasses individuals who have insulin resistance and usually have relative (rather than absolute) insulin deficiency (American Diabetes Association, 2018).

Patients with diabetes should maintain low levels of glycated hemoglobin A1C (HbA1c), blood pressure and low density lipoprotein (**ADA**, **2007**). However, only 10% of the patients meet all those three goals simultaneously (**Saydah et al.**, **2004**).