



EVALUATION OF PREDICTORS FOR THE DEVELOPMENT AND PROGRESSION OF DIABETIC RETINOPATHY AMONG DIABETES MELLITUS TYPE 2 PATIENTS

Syafawati Ab Saad, Maz Jamilah Masnan, Karniza Khalid, Safwati Ibrahim

SYAFAWATI BINTI AB SAAD

Faculty of Applied & Human Sciences, Institute of Engineering Mathematics, Universiti Malaysia Perlis, Kampus Alam UniMAP, Pauh Putra, 02600 Arau, Perlis,

Centre of Excellence for Social Innovation and Sustainability, Faculty of Applied & Human Sciences, Kampus Alam UniMAP, Pauh Putra, 02600 Arau, Perlis,

Ministry of Health Malaysia, Clinical Research Centre, Hospital Tuanku Fauziah, Jalan Tun Abd Razak, 01000 Kangar, Perlis

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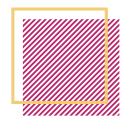




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Introduction



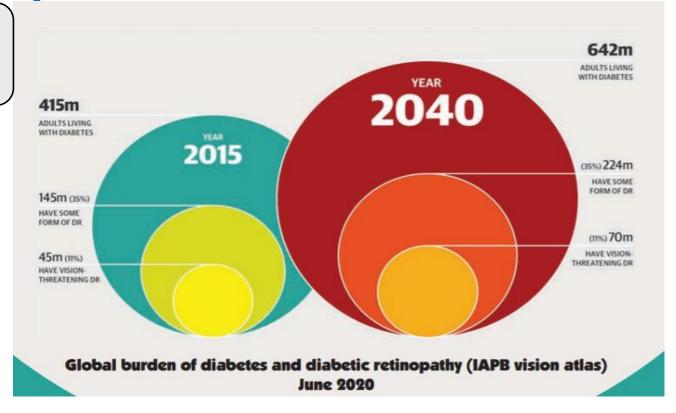
Diabetic Retinopathy

Diabetic retinopathy is highly specific microvascular complications caused by diabetes.

Prevalence of diabetic retinopathy worldwide arise from 6.8% to 44.4% in 2019.

Predict in year 2040 will be increased 224 million diabetes patients will diagnosed diabetic retinopathy, 70 million have vision threatening diabetic retinopathy worldwide

Prevalence of diabetic retinopathy in Malaysia has reported increase from 44.1% to 48.6%



Early detection of diabetic retinopathy could reduce 90% of severe vision loss.

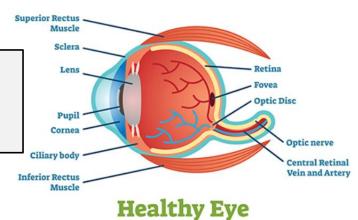


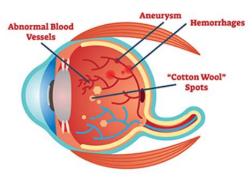
INTRODUCTION

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STAGES OF DIABETIC RETINOPATHY

Diabetic retinopathy causes progressive damage to the retina, i.e. the light-sensitive lining at the back of eye





Diabetic Eye

No Diabetic Retinopathy

Mild non-Proliferative Diabetic Retinopathy (NPDR)

Moderate NPDR

Severe NPDR

Proliferative
Diabetic
Retinopathy
(PDR)

Avdanced
Diabetic Eye
Disease
(ADED)

STAGE 1

STAGE 2

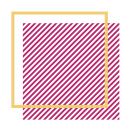
STAGE 3

STAGE 4

STAGE 5

Source: International Clinical Diabetic Retinopathy

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INTRODUCTION



IMPORTANCE OF INVESTIGATING THE PROGRESSION AMONG PATIENTS OF DIABETIC RETINOPATHY

Treatment costs increased as the stages of diabetic retinopathy increased.

May help clinicians to identify individual who will increase the progression of diabetic retinopathy.

Increase risk of serious complications which lead to permanent loss vision. Early detection of diabetic retinopathy could reduce 90% of severe vision loss.

Patients can experience a decline in best-corrected visual acuity, which can have a profound impact on health-related quality of life.



INTRODUCTION



This study involved three groups of diabetes patients:

GROUP 1

Diabetes patients who were diagnosed with diabetes without obvious clinical findings of diabetic retinopathy (show development)

GROUP 2

Diabetes patients who were diagnosed with diabetic retinopathy and remain in the same stage for a certain period of time until the current follow-up

GROUP 3

Diabetes patients who were diagnosed with diabetic retinopathy at certain stage for a period of time but progressively worsen over time during the current follow-up (show progression)



Objectives



To evaluate the predictors and risk factors associated to the development or progression of diabetic retinopathy among Group 1 and Group 3.



LITERATURE REVIEW



(Kim et al., 2014; Liu et al., 2017; Ali et al., 2016; Rudnisky et al., 2017; Yau et al., 2012)

Common Predictors and Risk Factors

Duration of diabetes, age, gender, HbA1c and hypertension

Demographics Predictors and Risk Factors

Age, gender, occupation, socioeconomic status, place of residence, body mass index

(Ranjini et al., 2017, Rudnisky et al., 2017, Hao et al., 2019)

(Fong et al., 2004, Lee et al. 2014, Kotlarsky et al. 2015 and Tsao et al. 2018)

Clinical Predictors and Risk Factors

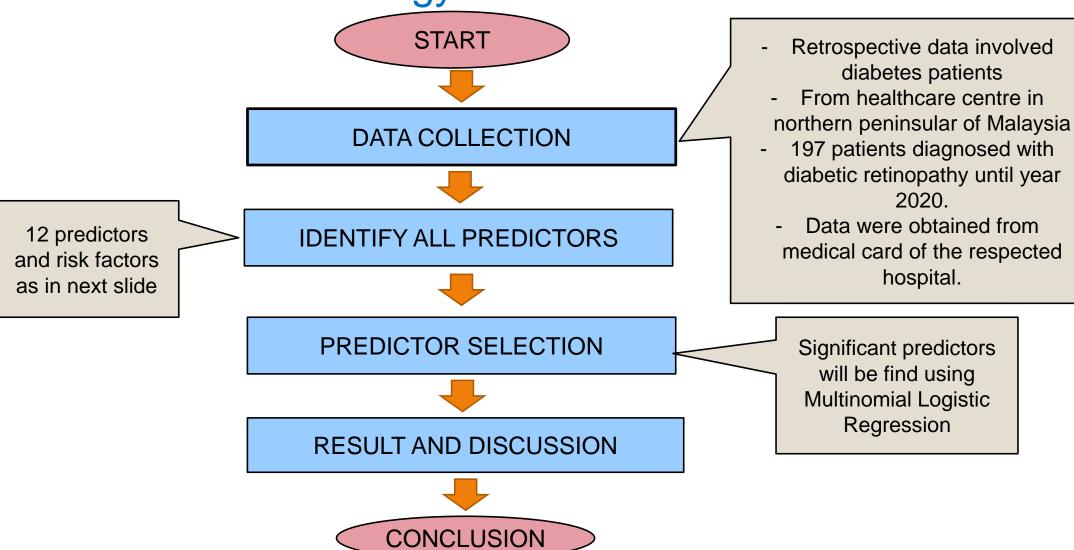
Glycosylated haemoglobin trends (HbA1c), systolic and diastolic blood pressure, serum creatinine, urea and insulin treatment



METHODOLOGY

Flowchart Of Methodology



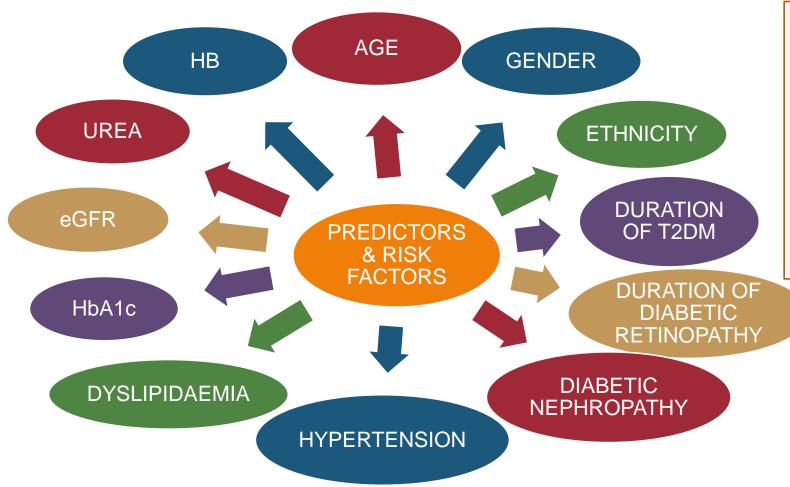




METHODOLOGY

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List of Predictors and Risk Factors



Abbreviations:

T2DM - Diabetes Mellitus
Type 2
HbA1c - glycosylated
haemoglobin
eGFR- glomerular filtration
rate
Hb - haemoglobin
concentration



METHODOLOGY



Statistical Analysis

MULTINOMIAL LOGISTIC REGRESSION:

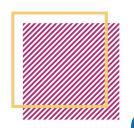
logit
$$(Y_{DR})$$
 = ln $\left[\frac{P(Y_{DR} = j \mid X)}{P(Y_{DR} = J \mid X)}\right]$ = $\beta_{j0} + \beta_{j1}X_1 + \beta_{j2}X_2 + ... + \beta_{jk}X_k$

Where j = 1, 2, ..., j -1, is a logit equation and j represents the categories of the reference outcome.

 $Y_{DR} = 0,1,2,3,4,5$ (stages of diabetic retinopathy)

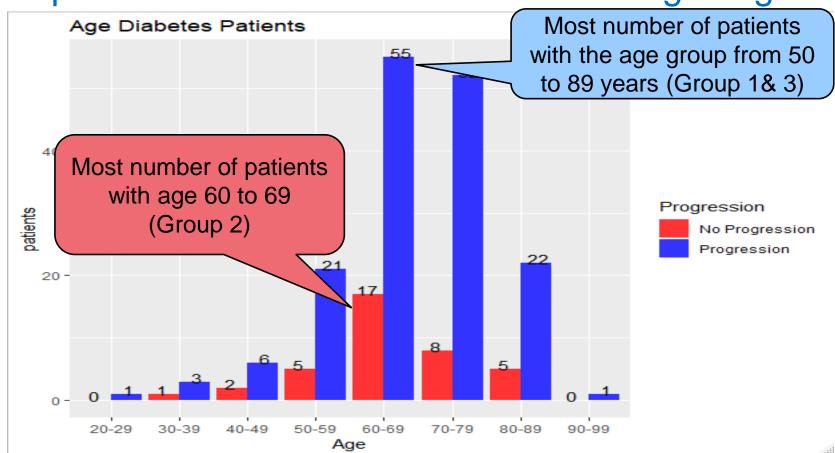
X refer to the predictors and risk factors associated with diabetic retinopathy, $X = X_1, X_2, ..., X_k$ can be either continuous or categorical predictors.

k denotes the number of predictors and risk factors for diabetic retinopathy.



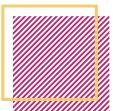


Composition Of Diabetes Patients According to Age Group



Blue bars refer to Group 1 and 3, red bars refer to Group 2

Figure 1: Comparison between diabetes patients with no progression and with progression status according to patients' age group.





Composition Of Diabetes Patients According to Gender

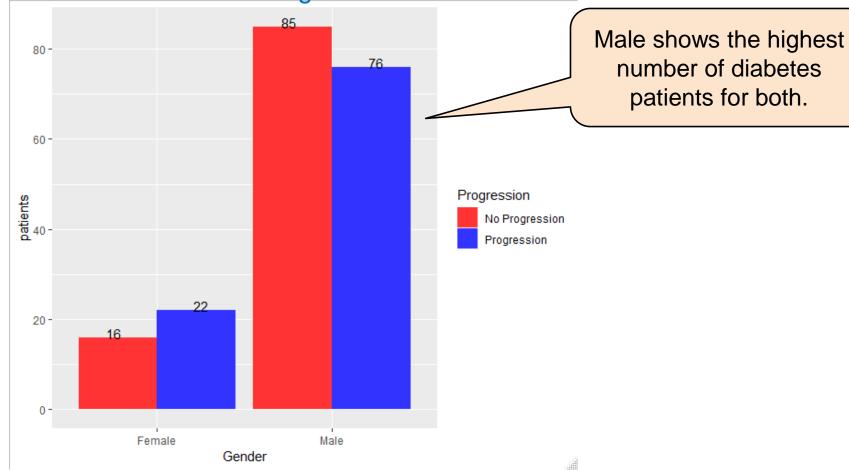
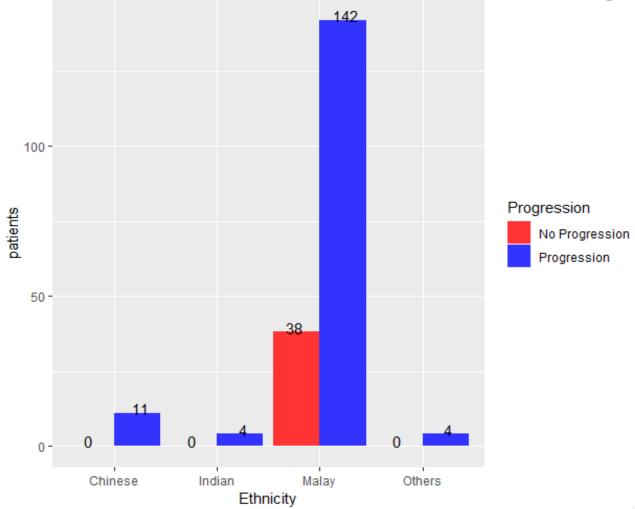


Figure 2: Comparison between no progression and with progression status according to gender.



Composition Of Diabetes Patients According to Ethnicity

72.08% of diabetes patients who visit for appointment are Malay patients. (Group 1&3)



All patients from Group 2 are Malay patients and from total all patients, about 19.28% patients from group 2

Figure 3: Comparison between no progression and with progression status according to ethnicity





Composition Of Diabetes Patients According to Stages Of Diabetic Retinopathy

Figure 4(a) refers to the stages for diabetes patients when first diagnosed with diabetic retinopathy.

Stage 4 to 5 also shown progression

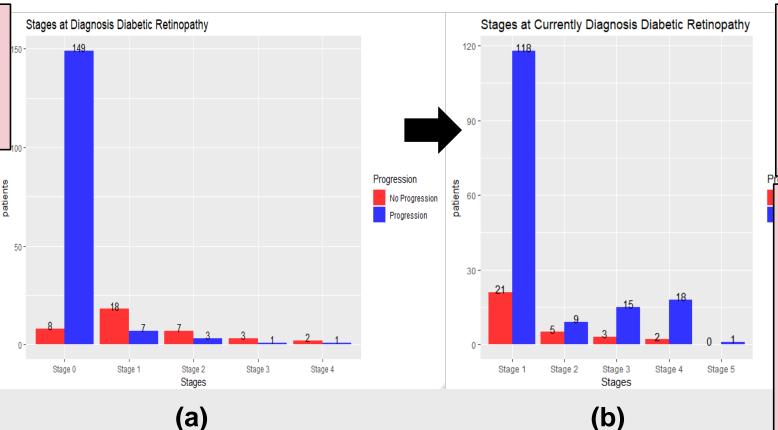


Figure 4(b) refers to the same diabetes patients when diagnosed with diabetic retinopathy during the current follow up.

118 diabetes patients who were first diagnosed with stage 0 have shown progression to stage 1, 9 patients have developed to stage 2, 11 patients developed to stage 3, and 15 patients developed to stage 4.

Figure 4: Comparison between the (a) developed stages at diagnosis of diabetic retinopathy and (b) stages diabetic retinopathy at current follow up.





Characteristics of diabetes patients according to with and without development/progression of diabetic retinopathy

Characteristics	All Patients (n=197)	Group 1 & 3 Patients with Development/Progression of Diabetic Retinopathy (n=161)	Group 2 Patients without Development/Progression of Diabetic Retinopathy (n=36)	P-value
Age	67.33 (10.99)	67.68 (11.02)	67.78 (11.02)	<0.001
Gender				<0.001
Male	0.52	0.53	0.42	
Female	0.48	0.47	0.58	
Ethnicity				0.9636
Malay	0.89	0.88	1.00	
Chinese	0.05	0.07		
India	0.03	0.01		
Others	0.02	0.01		
Duration of T2DM	12.66 (5.03)	13.31 (5.00)	12.52 (5.05))	<0.001
Duration Diabetic Retinopathy	6.02 (3.45)	6.79 (3.99)	5.96 (3.38)	<0.001





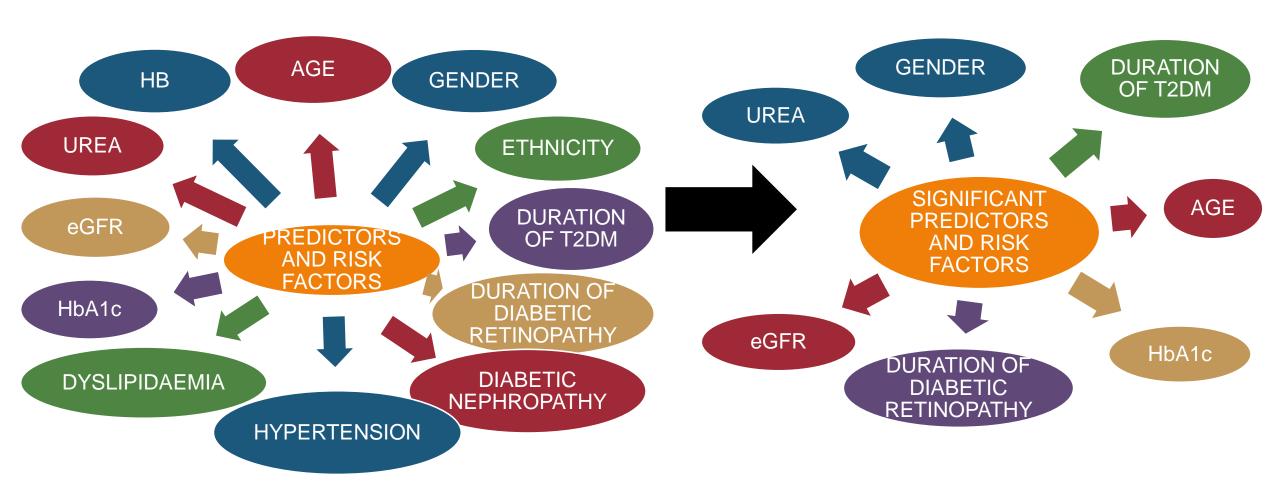
Characteristics	All Patients (n=197)	Group 1 & 3 Patients with Development/Progressio n of Diabetic Retinopathy (n=161)	Group 2 Patients without Development/Progression of Diabetic Retinopathy (n=36)	P-value
Diabetic Nephropathy	1.00	0.82	0.18	0.4392
Hypertension	0.99	0.82	0.18	0.576
Dyslipidaemia	0.89	0.91	0.20	0.6231
HbA1c	8.64 (2.47)	9.41 (2.50)	8.54 (2.47)	<0.001
eGFR	59.45 (25.34)	59.78 (25.37)	54.54 (23.47)	<0.001
Urea	7.04 (3.77)	7.82 (3.93)	7.44 (3.94)	<0.001
Hb	11.46 (2.01)	11.34 (2.00)	11.89 (1.97)	0.8069

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Predictor Selection





CONCLUSION



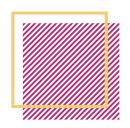
Age, gender, duration of T2DM, duration of diabetic retinopathy, HbA1c, eGFR and urea are significant to the progression of diabetic retinopathy.

Support the importance of giving attention to these significant predictors to the development and progression of diabetic retinopathy.

Avoid rapid progression of stages

Significant predictors could be given attention to prevent serious microvascular complications.

This study should be taken as the basis for further action be taken in healthcare management especially in diabetes disease management.



REFERENCES



Altomare, F., Kherani, A., & Lovshin, J. (2018). Retinopathy. Canadian Journal of Diabetes, 42, S210–S216. https://doi.org/10.1016/j.jcjd.2017.10.027

Cardoso, C. R. L., Leite, N. C., Dib, E., & Salles, G. F. (2017). Predictors of Development and Progression of Retinopathy in Patients with Type 2 Diabetes: Importance of Blood Pressure Parameters. *Scientific Reports*, 7(1), 1–10. https://doi.org/10.1038/s41598-017-05159-6

Euswas, N., Phonnopparat, N., Morasert, K., Thakhampaeng, P., Kaewsanit, A., Mungthin, M., Sakboonyarat, B. (2021). National trends in the prevalence of diabetic retinopathy among Thai patients with type 2 diabetes and its associated factors from 2014 to 2018. *PLoS ONE*, *16*(1 January), 1–14. https://doi.org/10.1371/journal.pone.0245801

Fong, D. S., Aiello, L., Gardner, T. W., King, G. L., Blankenship, G., Cavallerano, J. D., Klein, R. (2004). Retinopathy in Diabetes. *Diabetes Care*, 27(SUPPL. 1). https://doi.org/10.2337/diacare.27.2007.s84

Goh, P. P. (2008). Status of Diabetic Retinopathy Among Diabetics Registered to the Diabetic Eye Registry, National Eye Database, 2007. 63(September), 24–28

Haider, S., Sadiq, S. N., Lufumpa, E., Sihre, H., Tallouzi, M., Moore, D. J., ... Price, M. J. (2020). Predictors for diabetic retinopathy progression - Findings from nominal group technique and Evidence review. *BMJ Open Ophthalmology*, *5*(1). https://doi.org/10.1136/bmjophth-2020-000579

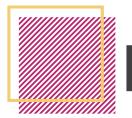
Kaewput, W., Thongprayoon, C., Rangsin, R., Ruangkanchanasetr, P., Mao, M. A., & Cheungpasitporn, W. (2019). Associations of renal function with diabetic retinopathy and visual impairment in type 2 diabetes: A multicenter nationwide cross-sectional study. *World Journal of Nephrology*, 8(2), 33–43. https://doi.org/10.5527/wjn.v8.i2.33

Kim, Y. J., Kim, J. G., Lee, J. Y., Lee, K. S., Joe, S. G., Park, J. Y., Yoon, Y. H. (2014). Development and progression of diabetic retinopathy and associated risk factors in Korean patients with type 2 diabetes: The experience of a tertiary center. *Journal of Korean Medical Science*, 29(12), 1699–1705. https://doi.org/10.3346/jkms.2014.29.12.1699

Liu, Y., Yang, J., Tao, L., Lv, H., Jiang, X., Zhang, M., & Li, X. (2017). Risk factors of diabetic retinopathy and sight-threatening diabetic retinopathy: A cross-sectional study of 13 473 patients with type 2 diabetes mellitus in mainland China. *BMJ Open*, 7(9), 1–11. https://doi.org/10.1177/0009922814528280

Mohd Ali, M. H., Draman, N., Mohamed, W. M. I. W., Yaakub, A., & Embong, Z. (2016). Predictors of proliferative diabetic retinopathy among patients with type 2 diabetes mellitus in Malaysia as detected by fundus photography. *Journal of Taibah University Medical Sciences*, 11(4), 353–358. https://doi.org/10.1016/j.jtumed.2016.03.002

Richard A. Jesen. (2009). A Search for Additional Risk Factors of Diabetic Retinopathy.



REFERENCES



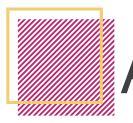
Romero-Aroca, P., Baget-Bernaldiz, M., Reyes-Torres, J., Fernandez-Ballart, J., Plana-Gil, N., Mendez-Marin, I., & Pareja-Rios, A. (2012). Relationship between diabetic retinopathy, microalbuminuria and overt nephropathy, and twenty-year incidence follow-up of a sample of type 1 diabetic patients. *Journal of Diabetes and Its Complications*, 26(6), 506–512. https://doi.org/10.1016/j.jdiacomp.2012.06.010

Rudnisky, C. J., Wong, B. K., Virani, H., & Tennant, M. T. S. (2017a). Risk factors for progression of diabetic retinopathy in Alberta First Nations communities. *Canadian Journal of Ophthalmology/Journal Canadien d'ophtalmologie*, *52*(November), S19–S29. https://doi.org/10.1016/j.jcjo.2017.09.023

Rudnisky, C. J., Wong, B. K., Virani, H., & Tennant, M. T. S. (2017b). Risk factors for progression of diabetic retinopathy in Alberta First Nations communities. *Canadian Journal of Ophthalmology*, *52*(November), S19–S29. https://doi.org/10.1016/j.jcjo.2017.09.023

Yau, J. W. Y., Rogers, S. L., Kawasaki, R., Lamoureux, E. L., Kowalski, J. W., Bek, T., Wong, T. Y. (2012). Global prevalence and major risk factors of diabetic retinopathy. *Diabetes Care*, *35*(3), 556–564. https://doi.org/10.2337/dc11-1909

Zhang, J., Wang, Y., Li, L., Zhang, R., Guo, R., Li, H., ... Teng, G. (2018). *Diabetic retinopathy may predict the renal outcomes of patients with diabetic nephropathy.* 40(1), 243–251. https://doi.org/10.1080/0886022X.2018.1456453



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