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Incidence of hypothyroidism and related factors among type 2 diabetic (T2D) outpatients

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Objectives: To assess the incidence rate of hypothyroidism and related factors in T2DM patients. Materials and Methods: Retrospective cohort study. From 2000 to 2005, medical records of 997 T2DM patients (79.6% women) in a referral clinic were collected. Hypothyroidism was defined by TSH level > 5mIU/L. Blood pressure was measured at each visit, BMI, TSH, lipid profile, serum creatinine, urine albumin/creatinine ratio were assessed at least every year, HbA1c every 3- 6 months. All patients were followed until 2016 or loss of follow up.

Results:

There were 102 cases of hypothyroidism, among these 25 had permanent and 78 transient hypothyroidism. The total follow up year was 9281.75 p-y. The incidence rate of permanent hypothyroidism was 1.83/1000 p-y. The relative risk of hypothyroidism in men was 0.55 (p=0.044).

At enrollment, mean age of all patients was 56.1 ± 11.5 yrs (mean \pm sd), BMI 24.5 ± 6.4 kg/m2, 43.65% of patients had high blood pressure.

There were no significant differences between the hypothyroid and non-hypothyroid group in term of age, BMI, duration of diabetes, HbA1c levels, urine albumin/creatinine ratio, estimated glomerular filtration rate, lipid profile.

Conclusion: The incidence rate of permanent hypothyroidism based on TSH level in T2DM patients is not high. This disorder tends to be higher in women. Screening for hypothyroidism in type 2 diabetic patients should be based on age (as in non- diabetic people) rather than on the diabetic state.