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Prognostic Factors in patients Hospitalised with Diabetic Ketoacidosis

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BACKGROUND: Diabetic ketoacidosis is characterized by biochemical tired of hyperglycemia, acidosis, and ketonemia. It remains a life threatening condition despite improvement in diabetic care, timely identification and intervention remains the backbone of treatment.
AIM AND OBJECTIVES: 1. To evaluate the clinical and biochemical prognostic markers in diabetic ketoacidosis. 2. To correlate the various prognostic markers with mortality in diabetic ketoacidosis.
SETTINGS AND DESIGN: A prospective multicenteric observational study done at tertiary care center.
METHODS AND MATERIALS: Eighty seven patients of type 1 diabetes hospitalized with diabetic ketoacidosis over a period of 1 year were evaluated clinically and by laboratory tests. Serial assays of serum electrolytes, glucose and blood pH, and clinical outcome of either discharge home or death were evaluated.
STATISTICAL ANALYSIS USED: Data were analyzed by SPSS version 17 and were presented in the values of mean, median, and percentages.
RESULT: The significant predicators of final outcome obtained were further regressed together and subjected with multivariate logistic regression (MLR) analysis. The MLR analysis further revealed that the male sex had 7.93 fold higher favorable outcome as compared to female sex (OR=7.93, 95% CI=3.99-13.51) while decrease in mean APACHE II score (14.83) and S. PO3-- (4.38) at presentation may lead 2.86 (OR=2.86, 95% CI=1.72-7.03) and 2.71 (OR=2.71, 95% CI=1.51-6.99) fold better favourable outcome respectively as compared to higher levels (APACHE II score: 25.00; S. PO3--: 6.04).
CONCLUSIONS: Sex, baseline biochemical parameters like APACHE II Score, and phosphate level, were important predicator of mortality from DKA.