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Abstract 06

PRESCRIPTION PRACTICES AND EFFECTIVENESS OF MONO VERSUS MULTIDRUG THERAPY IN A COHORT OF NEWLY DIAGNOSED SRI LANKAN DIABETIC PATIENTS.

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Background

Data on prescription practices and effectiveness of mono versus multidrug therapy at initiation of oral hypoglycemic medications is not available in Sri Lanka.

Objectives

We aimed to compare mono therapy versus multidrug therapy at initiation of anti-diabetic medications and subsequent glycaemic control up to two years in a Sri Lankan cohort

Methods

A cross sectional study was conducted in three Medical, one Endocrine and two Peripheral clinics of Anuradhapura District from August 2018 to March 2019. All the patients diagnosed with diabetes mellitus two years before and started on medications were recruited. Data were collected using an interviewer-administered questionnaire and was analyzed with SPSS version-22.

Results

Of 421 diabetic patients (81.1% female, mean age 55 ± 10.2 years) were studied, 132(31.3%) were started on monotherapy at initiation and 124(93.9%) of them were prescribed metformin. Prescription of multi over monotherapy was associated with high baseline fasting blood sugar (FBS) (p<0.0001), presence of diabetic complications at the diagnosis (p=0.004) and being treated at Endocrine clinics (p=0.004) but was not different with age (p=0.96), sex (p=0.50), smoking (p=0.74), BMI (p=0.17), having hypertension (p=0.67) or hyperlipidemia (p=0.23). Mean FBS at baseline (p<0.0001), 3 months (p<0.0001) and 6months (p<0.0001) were significantly different between mono and multidrug therapy but not at one year (p=0.065) or two years (p=0.159).

Conclusion

High baseline FBS, presence of diabetic complications at diagnosis and being treated at an endocrine clinic were associations of being started on multidrug therapy at diagnosis of diabetes mellitus in this cohort. However, there was no difference in the blood sugar control at the end of two years between the two groups.