

Saudi Med J. 2000 May;21(5):433-7.

Subclinical diabetic neuropathy: a common complication in Saudi diabetics.

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Abstract

OBJECTIVE:

To determine the prevalence of sub clinical diabetic neuropathy in Saudi diabetics and the risk factors associated with symptomatic diabetic neuropathy.

METHODS:

A prospective study of Saudi diabetics attending King Abdulaziz University Hospital out patient clinic from January 1998 until April 1999. Detailed information of each patients' age, sex, body mass index, type and duration of diabetes mellitus, mode of treatment, degree of blood glucose control, presence of hypertension, hyperlipidemia, smoking, family history of diabetes mellitus and hypertension were recorded. Patients were assessed for diabetic neuropathy using the Michigan Neuropathy Program. Patients who were asymptomatic and scored less than 2 on simple clinical examination were referred to a neurologist for a complete neurological examination and nerve conduction studies.

RESULTS:

A total of 237 patients were studied with a mean age of 54.19 years and mean duration of diabetes 10.6 years. Symptomatic diabetic neuropathy was present in 132 (56%) patients while subclinical neuropathy was present in 58 (57%) of asymptomatic patients. Old age, type II diabetes with long duration, poor control and smoking were risk factors associated with symptomatic diabetic neuropathy ($p < 0.001$, $p = 0.09$, $p < 0.001$, $p = 0.04$, $p = 0.08$).

CONCLUSION:

Subclinical diabetic neuropathy is common. Early diagnosis is important for possible prevention of late neuropathic complications (foot ulcers and infections). Prolonged poorly controlled diabetes mellitus, old age and smoking are risk factors for symptomatic diabetic neuropathy. Meticulous blood glucose control is important for nerve function protection. Researches are urgently needed for satisfactory therapy