

Development of diabetes in prediabetic population in Spain. PREDAPS study.

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Objectives: To determine the risk of T2DM and the risk of vascular complications in prediabetic patients and to identify factors associated with those risks, in patients treated at primary care level in Spain.

Design and Methods: It is an observational and multicentric study. The study included 1892 patients attended to by 125 primary care physicians from all over the country. The variables analyzed were: Family history, personal lifestyle, diet, smoking, alcohol consumption and physical activity, drug treatment, social support variables, socioeconomic and biographical data.

We define *two groups*:

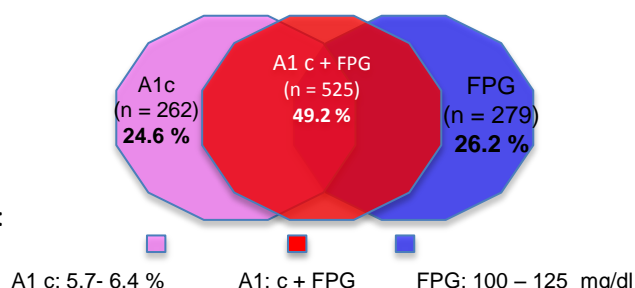
A) Prediabetic patient:

1. FPG 100-125 mg / dl and HbA1c (DCCT) <5.7%
2. FPG <100 mg / dl and HbA1c: 5.7% -6.4% or
3. FPG 100-125 mg / dl and HbA1c : 5.7% -6.4%.

B) Patients without alterations in carbohydrate metabolism:

1. All previous FPG <100 mg / dl and HbA1c <5.7%

Prediabetic patient distribution



Results: With regard to patients, 49.2% were men and 50.8% women, of which 1066 belong to the cohort of people with prediabetes and 826 to the cohort of subjects without alterations in glucose metabolism. Within the cohort of subjects with prediabetes, only 26.2% had impaired fasting glucose (IFG), 24.6% impaired HbA1c and 49.2% had both conditions.

Family and Personal History /PE*	Prediabetes (%)	No Prediabetes (%)
Father history of DM	17.4	14.5
Mother history of DM	29.8	18.8
Myocardial Infarction	2.3	0.7
Stroke	1.6	1.1
High blood pressure	52.9	35.7
BMI (kg/m ²)	30.5	27.5
Waist Circumference (cm)	101	93
Sistolic Pressure (mm Hg)	137	131
Diastolic Pressure (mm Hg.)	82.1	76.6

*physical examination

Lifestyle	Prediabetes (%)	No Prediabetes (%)
Daily vegetables intake	56.5	57.3
Daily fruit intake	77.7	78.3
Daily alcohol intake	26.6	23.8
Sedentarism	26.5	23.7
Smokers	15.7	23.4
Medication		
Diuretics	28.9	20.8
ACE Inhibitors	39.2	28.0
Statins	47.4	36.6

Conclusions: We found a higher percentage of people with both disorders: IFG and Impaired HbA1c. The results for personal and family history, physical examination and laboratory are consistent with those obtained in similar studies