Analysis of Blood Glucose Fluctuations Using a Continuous Glucose Monitoring System in Elderly Patients with Diabetes Mellitus and End-Stage Renal Disease on Maintenance Hemodialysis- An Observational Study

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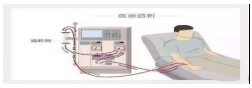
Patients

Age≥65 | With T2DM and ESRD | Undergoing maintain hemodialysis



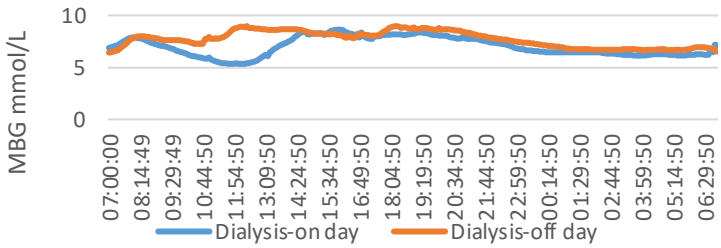
Methods

CGMS was applied, 13 pairs of CGMS data were collected

Dialysis-on day (n=13) **VS** Dialysis-off day (n=13)

Results

An inverted U-shape was observed from the beginning of hemodialysis to 2 hours post-hemodialysis. (8 a.m. to 2 p.m.)



Hyperglycemia happened more on dialysis-on day

	Hypoglycemia frequency				
	Totally	During dialysis	Within post-HD 2h	Afternoon to evening	At night
		8-12	12-14	14-22	22-8
dialysis-on day	12	2	4	3	3
dialysis-off day	3	1	0	0	2

Conclusions: HD not only increased the amplitude of glycemic excursion, but also increased the risk of hypoglycemia. Furthermore, the effect of dialysis on blood glucose levels was usually maintained from the initiation of hemodialysis to 2 hours post-hemodialysis.

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