## Effect of Glycosylated Hemoglobin with Microalbuminuria and Albumin Creatinine Ratio in Type 2 Diabetes

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Abstract	a:5:{i:0;s:517:"Background: Diabetes mellitus has strong correlation with end stage renal disease (ESRD) and responsible for 30-40% of all ESRD cases. This study is focused on assessing the diabetic nephropathy status in patients with type 2 diabetes. Glycated hemoglobin levels over therapeutic targets (>7%) had two times the risk of complications for diabetic nephropathy, ISN recommends the use of microalbuminuria and urinary albumin creatinine ratio (UACR) for early detection of diabetic nephropathy and for monitoring therapy.";i:1;s:136:"Objective: This study was conducted to prove the correlation between Glycated Albumin with microalbuminuria and UACR in type 2 diabetes.";i:2;s:388:"Methods: Cross sectional study was done in70diabetic type 2 patients who attended PROLANIS program in Primary Health Care from May to November 2018.Detailed medical history including the diabetes duration and relevant clinical examination like FBS, PPBS, HbA1c, urinary creatinineand urinary microalbumin were recorded in each patient.Significance is assessed at 5% level of significance.";i:3;s:529:"Results: This study obtained the mean age of the study population was 51.89 +/- 6.78 years with female preponderance (51.1%).Mean FBS, PPBS, HbA1c, duration of diabetes, blood pressure, microalbuminuria and urinary creatinine were182.51 +/- 74.63 mg/dL, 186.25 +/- 26.72 mg/dL, 8.8 +/- 1.83%, 9.37 +/- 5.96 years, 138.44 +/- 14, 13/84.44 +/- 19.25 mmHg,30.32 +/- 3.2 mg/day and 1.33 +/- 0.64 mg/dI respectively.Microalbuminuria (r=0.91, p <= 0.05) and UACR (r=0.67, p <= 0.05) were positively associated with glycated hemoglobin.";i:4;s:153:"Conclusion: It can be concluded that microalbuminuria level and ACR increase in line with the worsening of glycosylated hemoglobin and diabetes duration.";}
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