AUTONOMIC NEUROPATHY AND CLINICAL INDICES OF IRON DEFICIENCY IN EARLY STAGES OF TYPE 2 DIABETIC NEPHROPATHY

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Abstract: Autonomic neuropathy and iron deficiency especially when severity results in anemia leads to impaired quality of life and possible deviation of HbA1C assessment that may have a deleterious effect on treatment in type 2 diabetes. We studied 368 type 2 diabetes outpatients with early stages of kidney disease (KDOQI 1-3). We found a higher than estimated prevalence of autonomic neuropathy, 8.7%, as well as of iron deficiency 21.7% - 56.5% and of anemia due to iron deficit 0%- 7.4% depending on kidney disease stage. In early stages of renal impairment in diabetes we found no association of autonomic dysfunction with erythropoietin dysfunction but with Tsat (OR=2.02, p=0.026) and Inflammation (CRP levels OR=3.208 p=0.051). Further studies are required to establish a therapeutic intervention (opportunity, side effects and efficiency).

Keywords: Autonomic neuropathy, iron deficiency, anemia, type 2 diabetes