



TYPE 2 DIABETIC WOMEN WITH ASYMPTOMATIC BACTERIURIA: A CROSS-SECTIONAL STUDY

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ABSTRACT

Background: Diabetes mellitus (DM) is a major health challenge worldwide. It is a risk factor for the development of asymptomatic bacteriuria (ASB) and urinary tract infection. Although the current guidelines do not recommend treatment of ASB among women with type 2 diabetes, it emphasizes the need for therapeutic trials based on culture sensitivity patterns. This study was aimed to determine the spectrum of organisms causing ASB and antibiotic sensitivity patterns. Therefore, we believe that this study would serve as road map to conduct therapeutic trials in subjects with ASB based on antibiotic sensitivity patterns. **Methods:** Cross-sectional study was conducted including both outpatients and inpatients on 250 Women with T2DM with no symptoms of UTI. They were investigated with FBS, PPBS, HbA1C, Urine routine-microscopy and Urine culture- sensitivity. The presence of ASB among women with T2DM was studied, and antibiotic sensitivity pattern was analyzed. Statistical Package for the Social Sciences (SPSS) version 20 was used for statistical analysis.

Results: The frequency of ASB in our study was found to be 39 out of 250 diabetic women, that is, 15.6%. The mean HbA1c was higher among diabetic women with ASB (9.63%) than without ASB (8.42%). Escherichia coli (58.97%) was most common organism isolated. Antibiotic sensitivity showed that most organisms were sensitive to Amikacin (64.1%), followed by nitrofurantoin (59.0%). Most organisms were resistant to fluoroquinolone (79.5%).

Conclusions: E. coli was the most common organism causing ASB in our study. Antibiotic sensitivity showed that most organisms were resistant to fluoroquinolones and were sensitive to amikacin. Further large-scale studies are required to study the effect of antibiotic sensitivity-directed therapeutic trials to conclude the efficacy of therapy in patients of ASB.

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