**BACKGROUND**

- Cystic Fibrosis related diabetes (CFRD) is a complication of CF. This is the second most common form of diabetes in Paediatrics. It has some features of Type 1 and Type 2 diabetes.
- Intensive management strategies including insulin therapy are needed to control hyperglycaemia, prevent diabetes-related complications and optimisation of nutrition.
- Symptoms and treatment of CFRD along with the routine CF management may impose additional burden to these children and adversely affect their health-related quality of life (HRQoL).

**OBJECTIVES**

- To assess the HRQoL in CF children with normal glycaemia (CFN) and CFRD
- To evaluate the HRQoL changes in children with CFRD over one year period following the commencement of insulin therapy and compare with those with normal glycaemia

**METHODS**

- A prospective observational study including 103 children with CF was undertaken. Data were collected at baseline and after 1 year.
- Demographic and clinical data were collected from children, parents and clinical notes.
- HRQoL data were collected from children using generic questionnaire (KIDSCREEN-10) and disease-specific (DISABKIDS-CF) questionnaire. Total score ranged from 0 to 100 and higher score with better HRQoL.

**RESULTS**

- Independent t-test showed that the children with CFRD were significantly older, with lower FEV1%. They were diagnosed with CF in an younger age compared to CFN group.

**CONCLUSIONS**

- Onset of diabetes adversely affect the HRQoL of children with CF.
- Findings suggest that insulin therapy improves symptoms and thus improves QoL.
- Diabetes prevention, detection and treatment are important in the care of children with CF.
- Further regression analysis is needed to assess the independent predictors of HRQoL in CFRD.
- Further research is warranted to explore the HRQoL associated symptoms and their severity in children with CFRD. This will help to plan management strategies to optimise their QoL.

**REFERENCES**