Glycaemic control in Children with Type 1 Diabetes in Malta

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OBJECTIVES

For children aged < 16 years with type 1 diabetes mellitus (T1DM) in Malta:

- To determine levels of glycaemic control during 2013 and 2014.
- To calculate the proportion attaining HbA1c < 7.5% (as recommended by ISPAD).

METHODS

- An estimated 96% of children with T1DM in Malta are seen by the Paediatric Diabetes Team on a regular basis at Mater Dei Hospital.
- MS Excel® was used to collect demographic and clinical data of the patients.
- A point-of-care analyser (Siemens DCA Vantage®) was used to measure HbA1c at each clinic visit, every 3 months; these results were validated by annual laboratory measurements of HbA1c from venous samples.
- The average HbA1c (± 95% CI) of all measurements taken in 2013 and 2014 was used to assess overall glycaemic control.

RESULTS

- Table 1: Patients according to age-group in 2013 and 2014
- Table 2: Proportion of children who achieved target HbA1c < 7.5% as compared with similar international data
- Table 3: Mean HbA1c
- Table 4: Proportion of children who achieved target HbA1c < 7.5% in Malta
- Table 5: Comparison of 2013 data between Malta and England / Wales

CONCLUSIONS

- Glycaemic control achieved in Malta in children aged < 16 years with T1DM was stable over the two years analysed.
- A higher proportion of patients in the younger age-group achieved an HbA1c target of < 7.5%. The patients most likely to have a higher HbA1c were in the older age-group.
- Our data is comparable, or slightly better, to that achieved in other European countries and the United States of America.
- There is always room for improvement, as the Swedish data has shown.
- Multidisciplinary team meetings could be one way to address those patients not achieving ideal HbA1c results.

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REFERENCES