Between J whose BMI is lower than the targets of weight interventions elsewhere. in Japan than in the US, suggesting interventions there should target individuals ≤ varied according to BMI category, with decrements in some scores, such as PCS, Graz, Austria. The DCEs were conducted through in-person interviews and examined six patients who had not previously self-administered injectable medications. A small minority of T2D patients (around 3 times as many persons are of working age in the type T1DM versus T2DM). Due to differences in the age distribution of diabetics treated with sulfonylurea or insulin-based therapy. A literature review for patient factors (-1.63 [SE 2.42], P = 0.093), compared with the non-P4P group after controlling for patient factors. The between-group difference in the EQ-SD-VAS score is not significant after controlling for patient factors (P = 0.2). Points: There is no difference in health status and health-related quality of life among patients participating in the newly featured P4P program versus non-participants.

PD833

ASSESSMENT OF KNOWLEDGE AND PRACTICE REGARDING FOOT CARE OF DIABETES MELLITUS PATIENT IN TERTIARY CARE HOSPITALS, QUETTA, PAKISTAN

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OBJECTIVES: This study aimed to assess the knowledge and practice of foot care in Diabetes Mellitus (DM) patients among two different Government hospitals and general community of Quetta city, Pakistan. METHODS: A cross-sectional study was conducted in two government hospitals and general population of diabetic patients in Quetta city. Data was collected from April to September 2015. A pretested questionnaire was used to assess the knowledge and practice of diabetic patients regarding foot care. The knowledge and practice scores were classified by adequately drawn cut-offs. Results: Among 80 respondents, 29.7% were educated but majority (n = 166, 46.2%) were having no education. A large number of respondents (80.7%) had adequate knowledge regarding foot care, but poor practice of foot care. Demographic characteristics, locality, Level of education, Occupation and income (p < 0.001) had statistically significant association with knowledge and practice score. CONCLUSIONS: The result of study shows adequate knowledge and poor practice among Diabetic patients regarding foot care, betterment of knowledge is necessary to enhance overall practice and to reduce diabetes foot complications.

PD835

EFFECTIVENESS OF SELF-MONITORING OF BLOOD GLUCOSE (SMBG) IN REDUCING HbA1C OF DIABETES MELLITUS TYPE-2 PATIENTS IN JAKARTA, INDONESIA: PRELIMINARY FINDINGS

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OBJECTIVES: Indonesia could lose as much as US$93 billions due to diabetes between 2006-2015. The prevalence of DM patients was 6.9 million people in 2010 and it is expected to reach 10.4 million people in 2030. The majority of patients related to control blood sugar and HbA1C Level. It is hypothesized that patients who monitor their blood sugar have higher probability of compliance with diets and treatments. Therefore, providing DM patients with glucose monitor is assumed to be able to contribute for better outcome of treatment. We conducted a quasi experiment study by providing Self-Monitoring of Blood Glucose (SMBG) for DM patients in Jakarta. The study aims to ascertain good control of diabetic which can improve the effect of blood sugar control during SMBG. METHODS: A prospec- tive quasi experiment with 24-week observation after initial insulin therapy and glucometer distribution. The study population is 120 patients with the level of reduction HbA1c. 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OBJECTIVES: To translate, adapt and validate the Diabetes Distress Scale (DDS) instrument for Type 2 diabetes mellitus (T2DM) patients with various types of complications. METHODS: Participants were recruited from four hospitals and two primary healthcare facilities. The procedure of the study included forward and backward translations, an adaptation testing with a small subset of participants, and a validation test. Factor analysis with maximum likelihood estimation and promax rotation was used to investigate the instrument structure. Internal consistency among the items was estimated using Cronbach’s alpha for each of the four domains. RESULTS: 324 participants (246 from hospitals and 78 from primary healthcare facilities) were involved in this study. Understanding of the exact meanings of questions by study participants was improved by adding T2DM daily activities examples (e.g., diet, exercise and adherence to therapy) to several questions after the translations and adaptation procedure. The factor analysis showed correlation among the four factors ranging from 0.40 to 0.67. The order in the factor analysis accordance of the study domains, distress, and regimen distress. The internal consistency for the four domains ranged from 0.78 to 0.83. CONCLUSIONS: The DDS17 Bahasa Indonesia provides a valid and reliable scale for assessing distress of Indonesian T2DM outpatients. The use of this scale in future research and clinical trials is recommended for the Indonesian context.

PDB37
AN OBSERVATIONAL STUDY ON HELATH RELATED QUALITY OF LIFE IN DIABETES MELLITUS PATIENTS
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OBJECTIVES: The main objective of the present study focuses on evaluation of physical and social aspects of health related quality of life in Diabetic Mellitus patients in representative sample population. METHODS: The study consisted of a representative population sample of 325 out-patients with diabetes who were randomly selected from 5076 diabetic in-patients of the study period for emotional burden of one year at a tertiary care hospital, Warangal. Data was obtained using different sources and patients were interviewed to identify health related quality of life (HRQOL) using 3 modified questionnaires “SF-36 WHO wellbeing questionnaire, Quality of life enjoyment and satisfaction questionnaire, Diabetes specific quality of life scale questionnaire”. These modified questionnaire includes domains like emotional wellbeing, functional wellbeing, physical wellbeing, social/family wellbeing, diabetic specific goals and satisfaction on blood glucose values, burdens and restrictions from diabetes and its treatment. RESULTS: In the present study, the HRQOL is categorised as high, moderate and low. Overall patients are 325, among them 260 were adults and 65 were geriatrics further 152 were male, 173 were female. In reference with WHO, 62.8% of the adults, 3% geriatrics were affected moderately so it requires careful management of Diabetes Mellitus. Self-perceived health status was the main predictive factor influencing the overall HRQOL.

PDB38
PSYCHOMETRIC PROPERTIES OF THE CHINESE VERSION OF PROBLEM AREAS IN DIABETES SCALE (SG-PAID-C) AMONG HIGH-RISK POLYPHARMACY PATIENTS WITH UNCONTROLLED TYPE 2 DIABETES IN SINGAPORE
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OBJECTIVES: Undetected diabetes distress is a cause of concern. However, the lack of validated questionnaires is a barrier to screening and intervention for distress. The aim of this study was to examine the validity and reliability of the Chinese version of Problem Areas in Diabetes Scale (SG-PAID-c) and its association with socio-demographic and clinical parameters in patients with type 2 diabetes. METHODS: This cross-sectional study was conducted in four outpatient healthcare institutions in Singapore. Chinese-speaking patients with uncontrolled type 2 diabetes, polypharmacy, and multiple co-morbidities were administered SG-PAID-c and EQ-5D 5L questionnaires as quality of life measures. The factorial construct, convergent validity, and internal consistency of SG-PAID-c were evaluated. RESULTS: The exploratory factor analysis resulted in a three-factor structure of SG-PAID-c with subscales on emotional- and management-related problems (11 items), ability to cope with diabetes problem (3 items) and support-related problem (2 items). The findings also showed good model fit in the confirmatory factor analysis and provided support for the construct and convergent validity of SG-PAID-c. Overall, the internal consistency of SG-PAID-c was good (Cronbach’s alpha = 0.900). Gender and duration of diabetes were positively associated with 16-item SG-PAID-c while age and type of antidiabetic agents were inversely associated with 6-item SG-PAID-c (p < 0.05). CONCLUSIONS: The 16-item SG-PAID-c is a valid and reliable instrument for use among patients with diabetes in Singapore. Future studies on its clinical utility should be conducted.

PDB39
INCREASING TREND OF HEALTH RELATED QUALITY OF LIFE AWARENESS FOR DIABETIC CARE AMONG INDIAN SCIENTISTS
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OBJECTIVES: The health related quality of life (HRQoL) focused research in developing countries is scanty and far between, where 80% of healthcare cost is borne by the patient. Indian patients have different social, socioeconomic and personal factor that influence HRQoL in the heterogeneous patient population and may be directly extrapolated to Asian populations. This study was conducted to make an assessment of the trends in HRQoL research in patients with diabetes in India and Asia vis-à-vis the western population. METHODS: We performed literature searches in PubMed, Clinicaltrials.gov and country-specific registries for 1995-2016 to identify studies investigating HRQoL in patients with diabetes and compared these with those for the US and the UK. RESULTS: Only 46 publications were identified from India, followed by Malaysia (9), then China (6) and 7 from Singapore. The number of papers published in India populations increased from 2 in 1995-96 to 2001-2005 and 4 in 2005-2006 to 2011 in 2016. Similar trends were also observed in other Asian countries, eg China, South Korea, USA and UK employed generic HRQoL tools, viz. EQ-5D, SF-36, SF-12 and SF-6D. The diabetes specific assessment tools like ADDQoL were used very sparsely. A QoL tool (Quality of Life Instrument for Indian Diabetes patients, QOLID) specific for Indian patients with diabetes has also been developed recently but needs further validation. CONCLUSIONS: Research into the humanistic burden of diabetes is being increasingly recognized worldwide, including in Asian countries such as India, and may be expected to improve patient care.

PDB40
MARKETING SITUATION AND MEDICAL REFORM POLICY ANALYSIS OF ORAL HYPOGLYCEMIC DRUGS IN CHINA
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OBJECTIVES: To analyze the current marketed hypoglycemic drugs in China, and explore the effect of new medical reform policies on hypoglycemic drugs. METHODS: collect the registration information of oral hypoglycemic drugs from the official website of the China Medicine Information Center, analyze the variety and the revolution of the drugs. RESULTS: There were 9 categories of oral hypoglycemic agents in Chinese market, including 27 chemical drugs (including 9 different dosages) which provided 772 domestic manufacturers and 30 abroad manufacturers, and 26 traditional Chinese medicines (TCMs) which provided by 79 domestic manufacturers. Totally 22 chemical drugs were involved in the national medical insurance list, including 13 chemical ones and 9 TCMs. Among them, only 7 hypoglycemic included in the 2017 New Medical Reform Policy, 4 of them were included in the 2019 New Medical Reform Policy, including Glyburide, glipizide, glibenclamide, metformin, acarbose, Xiaokewan, Shenqi javascript:alert(‘1’); qing particles. CONCLUSIONS: Oral hypoglycemic chemical agents can basically ensure domestic need of diabetes therapy. In the field of anti-diabetic therapy, traditional Chinese medicines occupied a certain market. The implementation of national essential medicines system and medical insurance policy meet the basic need of diabetic patients to some extents, but more coverage and reimbursement were needed in the increasing population and burden of diabetic patients.

PDB41
STUDY OF PRESCRIBING PATTERN OF ANTI-DIABETIC DRUGS IN NEWLY DIAGNOSED TYPE 2 DIABETES MELLITUS
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OBJECTIVES: To study the prescribing pattern of anti-diabetic drugs in newly diagnosed type 2 diabetes mellitus (T2DM) patients. METHODS: Retrospective observational study, carried out in a south Indian tertiary care teaching hospital. Institutional ethics committee approval was obtained prior to the study. As per the study criteria, data of newly diagnosed T2DM patients admitted during the year 2013 and 2014 was collected from medical records department (MRD) registry using ICD code E 11.9. Drug utilization was measured as DDD/1000 diabetic patients/day. RESULTS: During the study period total 662 patients were newly diagnosed with T2DM. The age mean of study population was 52.5 ± 12.5 years (mean±SD) and 64.5% of patients were male. 164 patients had over weight and 67 patients were obese. Generalized weakness (n=89), fatigue (n=70) and polyuria (n=41) were the most common symptom present at the time of diagnosis. Among the study population 39.4% patients received single anti-diabetic drug, 29.3% patients received dual anti-diabetic drug and 17.8% patients received multiple anti-diabetic drug treatment. 39.9% patients received only oral anti-diabetic drugs, 18.6% patients received only insulin therapy, while 29.1% patients received combination of oral anti-diabetic drugs and insulin therapy. Consumption of insulin was 4.1 DDD/1000 diabetic patients/day in 2013, which was increased to 6.3 DDD/1000 diabetic patients/day in 2014. Among the oral anti-diabetic drugs biguanides (58.2%) was the most common prescribed, followed by sulfonylureas (29.3%) and alpha-glucosidase inhibitors (5.4%). Combination of biguanides and insulin was prescribed to 4.9% patients. Among the oral anti-diabetic drugs combination of metformin and sulfonylureas was the highest both in 2013 and 2014 (2.7 DDD/1000 diabetic patients/day), whereas consumption of sulfonylureas was decreased from 1.8 DDD/1000 diabetic patients/day in 2013 to 1.6 DDD/1000 diabetic patients/day in 2014. CONCLUSIONS: This study reveals that insulin and metformin was the most prescribed anti-diabetic drug in our hospital.

PDB42
HEALTH CARE DIRECT COST BURDEN OF DIABETES IN MEDICARE BENEFICIARIES WITH OBESITY

DIABETES/ENDOCRINE DISORDERS – Health Care Use & Policy Studies

PDB40