

## GLYCAEMIC CONTROL AND HYPOGLYCAEMIA AMONG PATIENTS WITH DIABETES IN A PHARMACIST-MANAGED INSULIN TITRATION PROGRAMME

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## Published online: 23 November 2023

**To cite this article:** LIM, P. C., WONG, T. Y., LIM, Y. L., LIM, S. L. & LEE, C. Y. (2023) Glycaemic control and hypoglycaemia among patients with diabetes in a pharmacist-managed insulin titration programme, *Malaysian Journal of Pharmaceutical Sciences*, 21(2): 1–12, https://doi.org/10.21315/mjps2023.21.2.1

To link to this article: https://doi.org/10.21315/mjps2023.21.2.1

## ABSTRACT

The impact of a pharmacist-managed insulin titration has never been systematically assessed among patients with diabetes. This study aimed to evaluate the impact of pharmacist-managed insulin titration on glycaemic control, total daily insulin dose, hypoglycaemia, hunger and body weight. Data was collected retrospectively from patients treated with insulin under the care of a pharmacist-managed insulin titration programme at the Diabetes and Endocrine Clinic, Hospital Pulau Pinang, Pulau Pinang, Malaysia. Patients who followed-up with pharmacists at one month to two months intervals and completed at least eight visits were included. Ninety-one patients (59.3% male) aged 50.82 ± 17.63 years old with 13.38 ± 8.88 years of diabetes were evaluated. Glycaemic control improved significantly from baseline to  $4^{th}$  month (-1.19%, p < 0.001) and  $8^{th}$  month (-1.37%, p < 0.001). Majority of patients were on twice daily premixed insulin (44.0%) followed by basal insulin (28.5%), basal bolus (18.7%) and thrice daily premixed insulin (8.8%). Total daily insulin dose increased significantly from baseline to 8<sup>th</sup> month among patients on basal insulin (0.24  $\pm$  0.15 versus 0.29  $\pm$  0.18 units/kg/day, p = 0.008) whereas the opposite was seen in patients treated fully on insulin (1.06 ± 0.48 units/kg/day versus 0.96 ± 0.37 units/kg/day, p = 0.005). Total hypoglycaemia and hunger episodes reduced significantly from 160 episodes/month to 30 episodes/month, p = 0.001 and 39 cases/month to 5 cases/ month, p < 0.001, respectively, across all groups. Mean weight increased by 0.66 kg from baseline to  $8^{th}$  month, p = 0.045. Insulin dose had a positive correlation to hypoglycaemia, r = 0.338, p = 0.001. Pharmacist-managed insulin titration programme significantly improved glycaemic control and reduced hypoglycaemia occurrences.

Keywords: Pharmacist, Insulin, Titration, Glycaemic control, Hypoglycaemia

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