

## **COMPREHENSIVE CO-MANAGEMENT OF OLDER ADULTS WITH DIABETES AND STAGE 3 OR 4 KIDNEY DISEASE: IMPACT OF DIABETES SPECIALTY CARE**

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Optimizing diabetes management in older adults with advanced chronic kidney disease is a difficult endeavor because of contraindications to anti-diabetic agents and lack of expertise in using complex insulin regimens.

We evaluated the impact of co-management of such patients by a nephrologist and a diabetes specialty team. 20 subjects with type 2 diabetes older than age 55 with stage 3 or 4 diabetic nephropathy (eGFR 15-59) in a nephrology practice were referred to a specialty diabetes unit, attended a formal diabetes and nutrition class, and communicated with the specialty nurse every 2 weeks to report data on self-monitored blood glucose readings, hypoglycemia, and other treatment-related issues. Office visits with the endocrinologist were scheduled every 1-3 months and a multi-factorial risk reduction strategy was implemented.

14 women and 6 men with an average age of 68.5 years, 11 treated with multiple insulin injections, 8 with insulin pumps, and one with oral agents were followed for an average of 8 months. The median A<sub>1c</sub> level decreased from 7.9% to 7.2% a reduction of 0.7% (p=0.05). Mean body weight was 191.7 lbs at baseline and 192.2 lbs at follow-up; mean BP was 136/74 and 130/72 mm Hg, respectively. There was a non-significant change in the mean serum creatinine from 1.64 to 1.70 mg/dL, while the mean eGFR remained stable at 40.2 vs. 40.9 mL/min. Two subjects had brief hospitalizations for cellulitis, 3 had minor and transient hypoglycemia, while only 1 had a hypoglycemic episode requiring the assistance of another person.

This pilot study in older adults with diabetes and stage 3 or 4 chronic kidney disease utilizing the expertise of a diabetes unit, formal teaching, and frequent communication showed beneficial effects on glucose control, prevented weight gain, and maintained BP control and kidney function. Further research evaluating a collaborative approach for retardation of nephropathy progression, cost-effectiveness, and sustained quality of life improvement with is warranted.