









Hyderabad, India - 25-27 October

## **PROGRAMME BOOK**



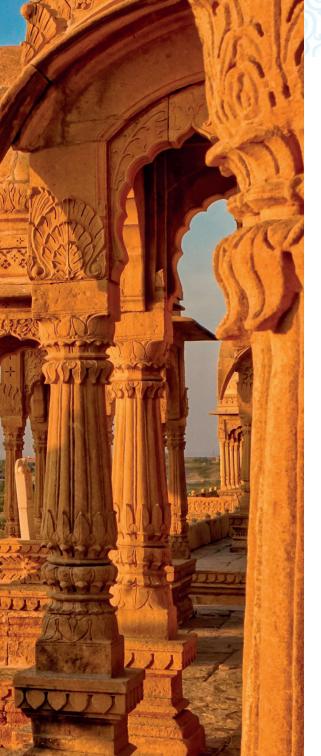












#### TABLE OF CONTENTS



## **Diabetes Complications** Congress 2018









Hyderabad, India - 25-27 October

•	Welcome address	4
•	International Diabetes Federation IDF	6
•	Congress at-a-glance	7
•	Learning objectives	8
•	Programme overview by day	12
•	Venue map & floor plans	16
•	General information A-Z	20
•	Programme Thursday	23
•	Programme Friday	41
•	Programme Saturday	69
•	Posters	91

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# WELCOME TO THE IDF DIABETES COMPLICATIONS CONGRESS 2018

It is with great pleasure that we welcome you to the IDF Diabetes Complications Congress 2018, the first in a new series of live educational events developed by the International Diabetes Federation to tackle the issues around diabetes complications.

**Diabetes currently affects 425 million adults**, a total that is set to reach **629 million by 2045**. When not appropriately managed, all types of diabetes can result in complications affecting many parts of the body, leading to frequent hospitalisation and early death.

Diabetes is one of the leading causes of **cardiovascular disease**, with one out of four diabetes inpatient costs a consequence of cardiovascular complications. **Diabetic retinopathy** is the leading cause of vision loss in working-age adults. The prevalence of **end-stage renal disease** is up to ten times higher in people with diabetes. Pregnant women with diabetes are at increased risk of **maternal and foetal complications**. **Losing a limb** is one of the most feared complications of diabetes and a major medical problem worldwide.

**India**, home to the **second largest number of diabetes cases** (73 million in 2017), is the ideal setting for IDF 2018. With over half of people currently living with diabetes in the country estimated to be undiagnosed, there is urgency to increase awareness and knowledge of diabetes and its associated complications among healthcare professionals to promote screening and early diagnosis to improve health outcomes and help save lives.

The IDF Congress 2018 features over 100 invited speakers from around the world and a dynamic programme, spread over nine streams, that provides the latest research, treatments and tools to limit and treat diabetes complications. The congress has been accredited with 15 European CME credits.

We look forward to an inspirational educational event that will help shape a better future for people affected by diabetes.



Professor Nam H. Cho President, IDF



Dr Shaukat Sadikot Chair, Organising Committee



Dr Ammar Ibrahim Chair, Programme Committee



Dr Banshi Saboo Chair, National Advisory Committee





## THE INTERNATIONAL DIABETES FEDERATION

The International Diabetes Federation is an umbrella organisation of over 240 national diabetes associations in 170 countries and territories. It represents the interests of the growing number of people with diabetes and those at risk. The federation has been leading the global diabetes community since 1950. IDF's mission is to promote diabetes care, prevention and a cure worldwide. For more information please visit www.idf.org

IDF | Promoting diabetes care, prevention and a cure worldwide.



## **CONGRESS-AT-A-GLANCE**

	Thursday 25 October	Friday 26 October	Saturday 27 October	
07.00		Satellite Symposia	Satellite Symposia	07.00
08.30		Break	Break	08.30
09.00		Plenary Lectures	Plenary Lectures	09.00
10.15		Scientific Sessions	Scientific Sessions	10.15
11.15	Registration	Tea/coffee break	Tea/coffee break	11.15
11.30		Scientific Sessions	Scientific Sessions	11.30
12.30				12.30
13.00	Lunch	Lunch / Posters / Satellite Symposia	Lunch / Posters / Satellite Symposia	13.00
14.00				14.00
14.30	Scientific Sessions	Scientific Sessions		14.30
15.15	Scientific Sessions	Scientific Sessions	Scientific Sessions	15.15
15.45	Tea/coffee break			15.45
16.00		Scientific Sessions		16.00
16.15		Tea/coffee break	Tea/coffee break	16.15
16.30	Scientific Sessions		Closing Ceremony	16.30
17.00		Scientific Sessions		17.00
17.15				17.15
17.45	Scientific Sessions	Plenary Lectures		17.45
18.30	Presidential Oration	Fieldly Lectures		18.30
19.00				19.00
	Satellite Symposia	Satellite Symposia		
21.00				21.00

#### **LEARNING OBJECTIVES**

#### **Diabetes Complications**

#### **Stream Description**

This stream deals with general aspects of common and rarer diabetic complications, the latest research into these complications and up-to-date prevention politics and treatments.

#### **Learning Objectives**

After attending a session in the *Diabetes Complications* stream the participant will be able to:

- Understand the epidemiology, pathophysiology, diagnosis, prevention and treatment of the complication developed in the session
- Decide how to individualise the diagnostic, prevention and treatment tools in the setting where they operates as healthcare practitioner
- Define the appropriate moment to refer the patient to a level of greater complexity

#### **Diabetic Foot**

#### **Stream Description**

This stream deals with general aspects of the diabetic foot as well as the epidemiology and public health challenges presented by the condition. It also focuses on education and care needed for management and prevention of diabetic foot.

#### **Learning Objectives**

After attending a session in the *Diabetic Foot* stream the participant will be able to:

- Identify the importance of prevention of diabetic foot and to be able to detect the risk factors for it
- Understand the latest innovations in diabetic foot treatment
- Better understand the impact of diabetic foot problems on patients, their families and on the healthcare system
- Use available resources to improve the outcome of patients with diabetic foot
- Correctly plan the establishment of diabetic foot centres

#### **Foot - Peripheral Arterial Disease**

#### **Stream Description**

Peripheral Arterial Disease (PAD) is frequent in people with diabetes being one of the strongest predictors of non-healing foot ulcers and amputations and an independent factor for increased mortality due to associated cardiovascular and cerebrovascular diseases. PAD in diabetes is largely asymptomatic until an advanced stage. It is usually present at an earlier age and progresses more rapidly and extensively than in patients without diabetes. There is strong evidence to show that early detection of PAD with interventions targeted on risk factor modification and revascularisation will reduce the rates of disease progression and amputations. In real life, many patients still have no vascular assessment even when having a foot ulcer or before amputation. The prevention and management of neuroischaemic ulcers is overlooked and underused in high-risk patients. To change this paradigm, healthcare services for people with PAD should include multidisciplinary trained teams with clear definitions of tools and objectives to be attained including the use of specific educational programmes.

#### **Learning Objectives**

After attending sessions in the *Foot - Peripheral Arterial Disease* stream, participants will be able to:

- Know and discuss epidemiology of foot ulceration and diabetic peripheral arterial disease
- Know the pathophysiology of arterial disease in diabetic foot (mechanisms, specificities, and risk factors)
- Know how to screen patients with diabetic foot for PAD and be able to make clinical diagnoses
- Know the treatment of PAD- lifestyle and risk factor modifications, drug therapy and vascular interventions
- Make the correct decision and timely referral to a specialist
- Understand and recognise the importance of new technics and technology in diagnosis and treatments for PAD
- Discuss different health care organisation models for the best care in PAD

#### **Foot - Ulcers and Infection**

#### **Stream Description**

The scientific sessions on foot ulcer and infections will teach current concepts on how to recognise, evaluate and manage patients with diabetes related foot and ankle conditions, complicated by peripheral neuropathy, vascular diseases, foot ulcers and infection. Medical and surgical treatments as well as an overall review of diabetes will enhance the attendees' knowledge to improve care in their practice.

#### **Learning Objectives**

After attending sessions in the *Foot - Ulcers and Infection stream*, participants will be able to:

- Learn and review the basic science of wound healing, the advances in technologies apply to the process of healing, and some of their challenges.
- Learn about how the foot function affects the risk of developing a foot ulcer, and how to offload the foot to heal difficult wounds.
- Learn advances in the treatment of diabetic foot soft tissue infections and osteomyelitis, specifically controversies in diagnosis, medical, and surgical management.
- Learn about evidence-based assessment and medical treatment
  of vascular diseases related to diabetes and to the foot and ankle.
  The audience will also learn to recognise podiatric issues related to
  vascular problems to better manage the patients in a timely manner

## Foot - Peripheral Diabetic Neuropathy and Charcot

#### **Stream Description**

The diabetes pandemic is forcing a necessary and much needed mandatory preventative approach to diabetic neuropathy on a global level. We are urging all healthcare practitioners to fully understand the pathway of destruction of the diabetic foot and alternatively the much more favoured pathway to prevention in managing the diabetic foot. Only with full understanding of neuropathy and its role in the formation of ulcers, amputations and the Charcot foot are we able to prevent foot complications. An urgency to intervene in the "Window

of Presentation" (risk category 1 and 2 before progression to 3) will be reviewed with participants. Research on the treatments for painful and painless neuropathy will be reviewed. The focus of will be on real life treatment protocols, as well as management in developing countries, as the burden of diabetes are in these countries. Through education and fully understanding the IDF Diabetic Foot Guidelines we can decrease the morbidity of foot complications globally and keep diabetic patients active, walking and mobile.

#### **Learning Objectives**

After attending sessions in the *Foot - Peripheral Diabetic Neuropathy* and *Charcot* stream, participants will be able to:

- Fully understand the IDF Diabetic Foot Guidelines
- Fully understand current screening techniques and diagnosis for diabetic neuropathy
- Fully understand early intervention in assessing, risk categorising and treating neuropathy
- Recognise the urgency to intervene in the "Window of Presentation"
- Understand how intervention and protection of the neuropathic foot in developing countries is done; this is the burden of the newly diagnosed cases
- Understand current medical and non-medical treatment of painless and painful diabetic neuropathy
- Fully understand how to intervene to prevent the destruction of the neuropathic foot from progressing into the Charcot foot
- Be able to manage the Charcot foot
- · When to refer to the multidisciplinary foot clinic

#### **Cardiovascular Risk Factors**

#### **Stream Description**

Diabetes mellitus is a major health problem globally as a consequence of the aging of the population, unhealthy lifestyle and the resultant epidemic of obesity. Cardiovascular disease is the leading cause of morbidity and mortality in people with diabetes and is the largest contributor to health care costs for diabetes. A number of cardiovascular risk factors co-exist in people with diabetes including hypertension, hyperlipidaemia, insulin resistance and obesity. There is good evidence that management of risk factors such as blood pressure, dyslipidaemia and glucose can lead to improved microvascular and macrovascular complications in individuals with type 2 diabetes mellitus and also legacy benefits of multifactorial risk factor control. In addition, lifestyle factors such as nutrition and physical activity also influence cardiometabolic risk factors. International guidelines therefore consider people with diabetes and cardiovascular risk factors and microvascular disease as having high cardiovascular risk and recommend regular assessment and management of cardiovascular risk factors in these populations.

#### **Learning Objectives**

After attending sessions in the *Cardiovascular Risk Factors* stream, participants will be able to:

- Understand the epidemiology of risk factors associated with cardiovascular outcomes in people with diabetes
- Understand the evidence for multifactorial risk factor management in people with diabetes
- Discuss the evidence base for lifestyle interventions in people with diabetes
- Understand individualisation of risk factors targets for people with diabetes
- Will be able to manage risk factor using evidence based therapies in people with diabetes
- Recognise the importance of novel risk factors such as hypoglycaemia and albuminuria for cardiovascular complications in people with diabetes
- Understand the epidemiology of gestational diabetes and vascular aging in relation to cardiovascular complications
- Discuss different health care organisation models for the best care in PAD

#### **Coronary Heart Disease and Heart Failure**

#### **Stream Description**

Cardiovascular disease has emerged as a central target in patients with diabetes. This has now extended to all vascular areas within the insulin resistant patient. Translational information on the disease process starts in some cases with parents and then extends to their offspring. Individuals with insulin resistance or diabetes in combination with one or more of these risk factors (obesity, HT, lipids, poor lifestyle) are at even greater risk of heart disease or stroke. However, by managing their risk factors, patients with diabetes may avoid or delay the development of heart and blood vessel disease. In this section, we will focus on clinical cardiovascular disease in relation to insulin resistance in high-risk patients.

#### **Learning Objectives**

After attending sessions in the *Coronary Heart Disease and Heart Failure* stream, participants will be able to:

- Understand of the translational science that relates to guidelines in clinical practice for diabetes patients
- Understand global impact of insulin resistance in the development of cardiovascular disease
- Know of the impact of diabetes on the myocardium
- Know of the mechanism involved in the development of vascular disease
- Have new insights into the treatment of normal and reduced ejection fractions in patients with diabetes
- Have new insights into the beneficial effects on the CV system with new cardio-renal agents that reduce glucose
- Review the current standards of care in the treatment of global risk factors
- Understand the future consideration in vascular and renal protection in diabetes patients

#### **Diabetes and Kidney Disease**

#### **Stream Description**

The scientific sessions in the Diabetes and Kidney Disease stream will offer researchers and healthcare professionals the unique opportunity to review recent advances in diabetic kidney disease, hot topics and controversies with emphasis on sharing ideas and knowledge.

#### **Learning Objectives**

After attending sessions in the *Diabetes and Kidney Disease* stream, participants will be able to:

- Understand the epidemiology, pathophysiology, genetic, diagnosis, prevention and treatment of the kidney complications developed in the session
- Decide how to individualise the diagnostic, prevention and treatment tools in the setting where they operate as healthcare practitioner
- Define the appropriate moment to refer the patient to a level of greater complexity
- Identify recent advances in the diagnosis and management

#### **Diabetic Eye Disease**

#### **Stream Description**

The increasing global prevalence of diabetes has led to a corresponding epidemic of diabetic eye disease. Screening and timely intervention in the presence of sight threatening diabetic eye disease can prevent visual loss however diabetic retinopathy remains the leading cause of visual loss in many countries. A holistic approach is mandatory as diabetic eye disease is an end organ response to a systemic disease — diabetes. Awareness, metabolic control and control of other risk factors are the mainstay in this respect. Besides further research on the pathophysiology, and primary and secondary prevention of diabetic eye disease, we need to focus on translating the evidence available to prevent visual loss, into public health action which will impact the lives of people with diabetes. This will be facilitated by the development and proper implementation of new/ existing nation-wide/region-wide/global initiatives. Only in this way can we decrease the global morbidity cause by diabetic eye disease.

#### **Learning Objectives**

After attending sessions in the *Diabetic Eye Disease* stream, participants will be able to:

- Review current diagnosis of diabetic eye disease and current screening recommendations and future developments
- Review current treatment strategies for diabetic eye disease and future developments
- Recognise the importance of holistic approach to the diabetic eye disease
- Recognise the importance of translation of evidence base into the real life to reduce the burden of diabetic eye disease

## PROGRAMME OVERVIEW - THURSDAY 25 OCTOBER

	Hall 4	Hall 5	Hall 6	MR G 1-3	MR G 4-6	
09:00	Registration	Registration	Registration	Registration	Registration	09:00
	Ground Floor	Ground Floor	Ground Floor	Ground Floor	Ground Floor	55.00
13:00	Lunch Break	Lunch Break	Lunch Break	Lunch Break	Lunch Break	13:00
14:00	Symposium:	Symposium:	Symposium:	Symposium:	Workshop:	14:00
	Neuropathy	Peripheral arterial disease management	Infections in diabetes	Wound care	Can diet modulation help in averting chronic complications	
15:15	Debate:	Debate:	Debate:	Debate:		15:15
	Is ABI a predictor for peripheral vascular disease in diabetes?	Is diabetes the first heart attack?	Can RAAS blockade prevent or delay the progression of diabetic nephropathy?	Individualisation of blood pressure targets for people with diabetes and hypertension		
15:45	Tea/Coffee Break	Tea/Coffee Break	Tea/Coffee Break	Tea/Coffee Break	Tea/Coffee Break	15:45
16:00	Symposium:	Symposium:	Symposium:	Symposium:	Panel Discussion:	16:00
	Diabetes and peripheral arterial disease	Diabetes and infections	Diabetes and the eye	Cardiovascular risk factors	Prevention of foot amputation and education in the diabetic foot	
17:15	Plenary Lectures:  IDF clinical practice recommendations on the diabetic foot & Inflammation: The yin and yang of diabetes complications	Plenary Lectures Hall 4	Plenary Lectures Hall 4	Plenary Lectures Hall 4	Plenary Lectures Hall 4	17:15
18:30	Presidential Oration:	Presidential Oration Hall 4	Presidential Oration Hall 4	Presidential Oration Hall 4	Presidential Oration Hall 4	18:30
	Check your eyes, look into the future					
19:00						19:00

Diab	betes Complications		Diabetic Foot		Cardiovascular Disease		Diabetic Eye Disease		Diabetes and Kidney Disease		Oral Presentations	
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## PROGRAMME OVERVIEW - FRIDAY 26 OCTOBER

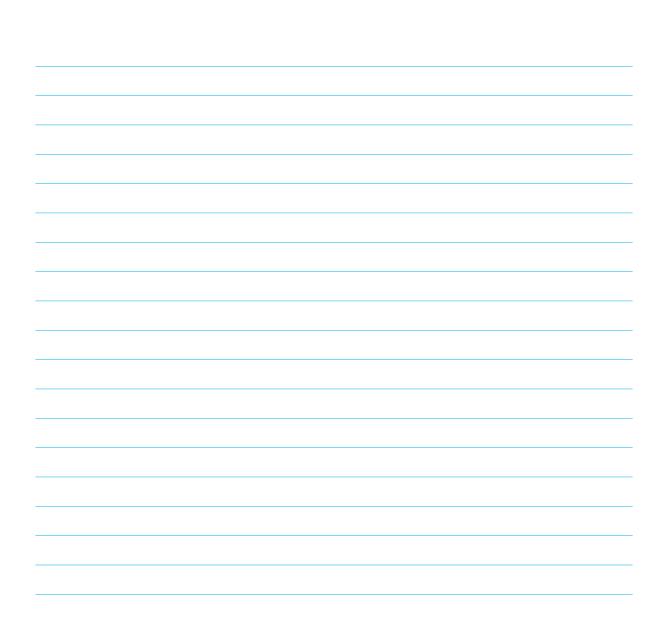
	Hall 4	Hall 5	Hall 6	MR G 1-3	MR G 4-6	
09:00	Diabetes and heart failure retrospect:  Perfectly imperfect truth - a future prospect & Cardiovascular outcomes trials of commonly used antiglycaemic medications	Plenary Lectures Hall 4	Plenary Lectures Hall 4	Plenary Lectures Hall 4	Plenary Lectures Hall 4	09:00
					2 12	40.45
10:15	Symposium: Foot treatment strategies	Symposium: Acute complications in diabetes	Symposium: Diabetes and the liver	Symposium: Autonomic neuropathy	Panel Discussion: Heart failure in diabetes: Is it different and how do we manage it?	10:15
11:15	Tea/Coffee Break	Tea/Coffee Break	Tea/Coffee Break	Tea/Coffee Break	Tea/Coffee Break	11:15
11:30	Symposium:	Symposium:	Symposium:	Symposium:	Symposium:	11:30
	Prevention of ulcers and amputations	Risk factors for cardiovascular disease	Diabetes nephropathy I	The mind should never be forgotten	Gadgets for the diabetic foot	
12:30	Lunch Break Posters	Lunch Break Posters	Lunch Break Posters	Lunch Break Posters	Lunch Break Posters	12:30
14:30	Symposium:	Symposium:	Symposium:	Symposium:	Workshop:	14:30
	Diabetes and hypoglycaemia	Diabetes and the eye	Reducing cardiovascular risk in patients with diabetic nephropathy	Nutrition	Diabetes and sexual dysfunction	
15:45	Debate:	Debate:	Debate:	Debate:		15:45
	Hypoglycaemia	The role of telemedicine in the diagnosis of diabetic retinopathy	Can type 2 diabetes patients have diabetic retinopathy in the absence of diabetic nephropathy?	Should a low-card, high-fat diet be used in patients with diabetes complications?		
16:15	Tea/Coffee Break	Tea/Coffee Break	Tea/Coffee Break	Tea/Coffee Break	Tea/Coffee Break	16:15
16:30	Symposium:	Symposium:	Symposium:	Symposium:	Panel Discussion:	16:30
	Diabetes and bone health	Diabetic nephropathy II	Diabetic foot infections	Footwear	Importance of social media and communications in education and prevention of diabetic complications	
17:45	Plenary Lectures: The diabetic foot: An update & Risk factors for microvascular complications in children and adolescents with diabetes	Plenary Lectures Hall 4	Plenary Lectures Hall 4	Plenary Lectures Hall 4	Plenary Lectures Hall 4	17:45
19:00						19:00

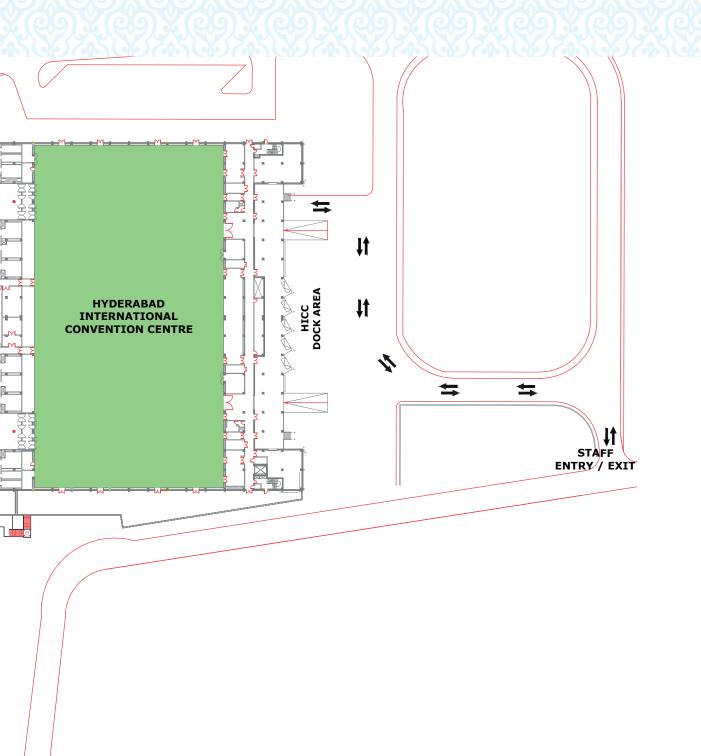
Diab	betes Complications		Diabetic Foot		Cardiovascular Disease		Diabetic Eye Disease		Diabetes and Kidney Disease		Oral Presentations	
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## PROGRAMME OVERVIEW - SATURDAY 27 OCTOBER

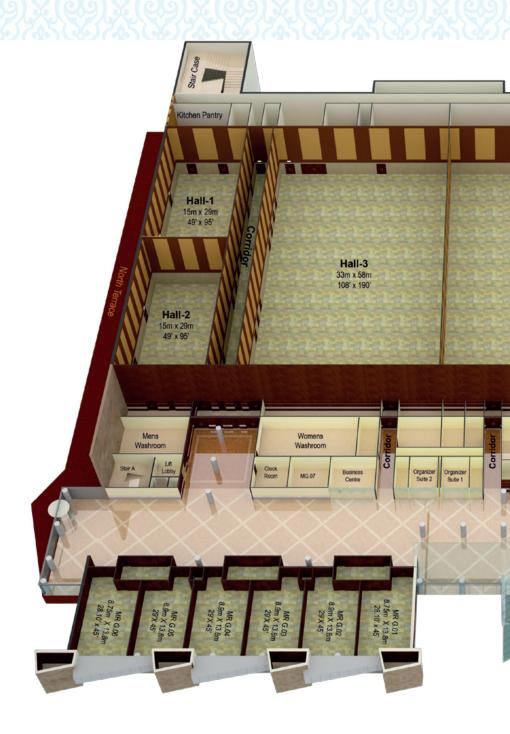
	Hall 4	Hall 5	Hall 6	MR G 1-3	MR G 4-6	
09:00	Plenary Lectures Classifications of diabetic neuropathy: How clinically useful are they? & The importance of team management for the diabetic foot: Equal roles of the diabetologist, vascular surgeon and podiatrist	Plenary Lectures Hall 4	Plenary Lectures Hall 4	Plenary Lectures Hall 4	Plenary Lectures Hall 4	09:00
10:15	Symposium:	Symposium:	Symposium:	Symposium:	Panel Discussion:	10:15
	Trending	Treatment of diabetic foot	Cardiovascular complications	Obesity	Insulins and other injectables in managing diabetes and its complications	
11:15	Tea/Coffee Break	Tea/Coffee Break	Tea/Coffee Break	Tea/Coffee Break	Tea/Coffee Break	11:15
11:30	Symposium:	Lectures:	Debate:	Symposium:	Panel Discussion:	11:30
	Other complications	Targets for glycaemia, dyslipidaemia and hypertension: How low should we go? & Prevalence and screening for complications in youths with diabetes	Is universal salt restriction useful in preventing cardiovascular complications?	Surgical approach to diabetic foot ulcers	The clinical approach to managing a person with early nephropathy	
12:30	Lunch Break Posters	Lunch Break Posters	Lunch Break Posters	Lunch Break Posters	Lunch Break Posters	12:30
14:30	Symposium:	Symposium:	Oral Presentations:	Oral Presentations:	Oral Presentations:	14:30
17.50	Treatment of complications	Newer updates	Diabetic Foot	Kidney, eye, cardiovascualar complications	Diabetes complications	17.30
16:15	Tea/Coffee Break	Tea/Coffee Break	Tea/Coffee Break	Tea/Coffee Break	Tea/Coffee Break	16:15
16:30	Closing Ceremony	Closing Ceremony Hall 4	Closing Ceremony Hall 4	Closing Ceremony Hall 4	Closing Ceremony Hall 4	16:30
17:00						17:00

Diabetes Complications	Diabetic Foot	Cardiovascular Disease	Diabetic Eye Disease	Diabetes and Kidney Disease	Oral Presentations





#### **HICC FLOOR PLAN**





#### **GENERAL INFORMATION A-Z**

#### **Badges**

Participants are requested to wear their badge at all times while in the congress centre. Kindly note that an administrative fee of € 20 /INR 1600 will be charged should a new badge be issued.

Colour code for badges	
Delegate	Blue
Exhibitor	Red
Invited speaker	Green
Media	Orange
Staff	Yellow

#### **Cash dispenser**

An ATM machine is located at the Novotel Hotel adjacent to the Hyderabad Convention Center.

#### **Catering**

Congress lunch is included in the registration fee and served between 13.00 and 14.00 on Thursday 25 October and between 12.30 and 14.30 on Friday 26 and Saturday 27 October.

#### The IDF Blue Circle for diabetes



The Blue Circle is the universal symbol for diabetes. The purpose of the diabetes symbol is to give diabetes a common identity.

The icon was originally developed in 2006 for the campaign for a United Nations Resolution on diabetes. The campaign was a response to the diabetes pandemic.

The blue circle aims to:

- support all existing efforts to raise awareness about diabetes
- inspire new activities, bring diabetes to the attention of the general public
- brand diabetes
- provide a means to show support for the fight against diabetes

Please wear the pin throughout the congress and unite with us for diabetes.

#### **Continuing Medical Education (CME)**

The IDF Congress is an accredited live learning event.

#### **European accreditation**

The IDF Diabetes Complications Congress 2018 has been accredited by the European Accreditation Council for Continuing Medical Education (EACCME) for a maximum of 15 European CME credits (ECMEC's).

EACCME is an institution of the European Union of Medical Specialists (UEMS), www.eaccme.eu. Each medical specialist should claim only those hours that he/she spent in a medical activity. EACCME credits are recognised by the American Medical Association (AMA) towards the Physician's Recognition Award (PRA). To convert EACCME credits to AMA PRA category 1 credit, contact the AMA.

#### Indian accreditation

Indian CME accreditation has been applied for from the Telengana Medical Council.

#### **Currency**

The Euro (EUR) is the official currency of the congress. Some local services may be priced in Indian Rupees. The current exchange rate can be checked under <a href="http://www.xe.com/currencyconverter">http://www.xe.com/currencyconverter</a>.

#### Language

The official language of the congress is English. All sessions will be in English only.

#### **Liability and insurance**

Neither the International Diabetes Federation (IDF), nor MCI (the appointed local partner) or any other supplier active in the congress centre will assume responsibility for injury and/or damage involving persons or property during the congress. Participants are advised to take out a personal insurance for the congress.

#### **Lost and Found**

Any lost & found item will be taken care by HICC security team +91 9642326246. Valuable item would be stored for 1 year and non valuable would be stored for 3 months.

#### Medicine and first aid

I case of emergency please contact HICC Security at +919642326246.

## **IDF Diabetes Complications Congress 2018 Opening hours**

Activity	Day	Hours
Individual registrations	Thursday 25 October- Saturday 27 October	08.00 - 17.00
Dostars	Friday 26 October	12.30 - 14.30
Posters	Saturday 27 October	12.30 - 14.30
	Thursday 25 October	14.00 - 19.00
Programme sessions	Friday 26 October	09.00 - 19.00
	Saturday 27 October	09.00 - 17.00

#### **Session recording policy**

No sessions may be recorded or broadcast in any format by any attendee.

Use of digital cameras to record individual slides is not allowed. The use of photographs of slides in any subsequent publication or presentation or any other distribution is a breach of copyright and may result in prosecution by the owner of the data or ideas. The use of flash is also forbidden.

#### **Speaker preview room**

The speaker preview room is located in the Organiser's office 1 on the ground floor of HICC. All speakers need to report to the speaker preview room at least 3 hours prior to the start of their session, for their presentations to be uploaded to the appropriate session hall. Speakers with early morning presentations should be at the speaker preview room the day before. No laptop presentations will be allowed in the session halls for the scientific programme.

Scheduled opening hours	
Thursday 25 October	11.00 - 19.00
Friday 26 October	07.00 - 19.00
Saturday 27 October	07.00 - 17.00

#### Time zone

Hyderabad is India Standard time, GMT+5:30 during the congress.

#### Wheelchair

Please contact HICC Security at +919642326246 if you require wheel chair services.

#### **PROGRAMME**

## **THURSDAY 25 OCTOBER**

14:00 - 15:15	Hall 4	
	Neuropathy	
	Chair: B. Saboo (India) Chair: J. Ahmad (India)	
14:00	Diabetic neuropathy: An overview  Speaker: R. Malik (Qatar)	001
14:20	Can we prevent diabetic neuropathy  Speaker: M. Djordjevic (Serbia)	002
14:40	Motor neuropathy: A neglected complication of diabetes  Speaker: A.K. Das (India)	003
15:00	Discussion	

15:15 - 15:45	Hall 4		
	Is ankle-brachial index a predictor for peripheral vascular disease in diabetes?		
		S. Reddy (India) R. Kovil (India)	
15:15	<b>Yes</b> Speaker:	B. Sosale (India)	004
15:25	<b>No</b> Speaker:	N. Deshpande (India)	005
15:35	Discussion	on	

16:00 - 17:15	Hall 4			
	Diabetes and peripheral arterial disease			
	Chair: R. Saxena (India) Chair: G.D. Ramchandani (India)			
16:00	Epidemiology of atherosclerotic peripheral arterial disease: A review and recent developments 000 Speaker: A.L. Costa (Portugal)			
16:20	Potential risk factors and types of vascular calcification in peripheral arterial disease  Speaker: R. Sahay (India)			
16:40	Recent advances and newer technologies in the management of peripheral arterial disease  Speaker: E. Jude (United Kingdom)			
17:00	Discussion			

17:15 - 18:30	Hall 4	
	Plenary Lectures	
	Chair: L. Ji (China) Chair: L.M. Gardete Correia (Portugal)	
17:15	IDF clinical practice recommendations on the diabetic foot  Speaker: A. Ibrahim (Dominican Republic)	009
17:45	Inflammation: The yin and yang of diabetes complications  Speaker: S. Sadikot (India)	010
18:15	Discussion	

18:30 - 19:00	Hall 4	
	Presidential Oration	
	Chair: S. Sadikot (India) Chair: A. Ibrahim (Dominican Republic)	
18:30	Check your eyes, see into the future Speaker: N. Cho (South Korea)	011

14:00 - 15:15	Hall 5	
	Peripheral arterial disease management	
	Chair: A. Ibrahim (Dominican Republic) Chair: R. Kovil (India)	
14:00	Managing peripheral arterial disease in primary care  Speaker: Z. Xu (China)	012
14:20	Critical limb ischaemia: The need for a new model of integrated care Speaker: P. Ramakrishna (India)	013
14:40	Improving care in different settings  Speaker: E. Jude (United Kingdom)	014
15:00	Discussion	

15:15 - 15:45	Hall 5		
	Is diabetes the first heart attack?		
	Chair: S. Rao (India) Chair: S.K. Kota (India)		
15:15	<b>Yes</b> Speaker: R.P. Sibarani (Indonesia)	015	
15:25	No Speaker: S.C. Agarwal (India)	016	
15:35	Discussion		

16:00 - 17:15	Hall 5			
	Diabetes and infections			
	Chair: S.R. Aravind (India) Chair: K. Sai (India)			
16:00	Diabetes and tuberculosis: A dual burden in 3rd world countries  Speaker: S.R. Joshi (India)	017		
16:20	Unusual infections in diabetes  Speaker: P. Chawla (India)	018		
16:40	Global recommendations of immunisation in patients with diabetes  Speaker: To be confirmed	019		
17:00	Discussion			

14:00 - 15:15	Hall 6	
	Infections in diabetes	
	Chair: K. Sai (India) Chair: T.K.M. Easwar (India)	
14:00	Genital infections - a clue to glycaemic control  Speaker: R. Chawla (India)	020
14:20	Recurrent urinary tract infections, mainly in post menopausal females: How to manage Speaker: A. Kaul (India)	02
14:40	Sterile pyuria in diabetes - what physicians should know Speaker: J. Panda (India)	022
15:00	Discussion	

15:15 - 15:45	Hall 6		_
	Can renin-angiotensin-aldosterone system blockade prevent or delay the progression of diabetic nephropathy?		
	Chair: L.M. Gardete Correia	(Portugal)	
15:15	<b>Yes</b> Speaker: M. Sahay (India)	02	23
15:25	<b>No</b> Speaker: T. Kamat (India)	02	24
15:35	Discussion		

16:00 - 17:15	Hall 6	
	Diabetes and the eye	
	Chair: G. Tan (Singapore) Chair: A. Patel (India)	
16:00	Current recommendations for diabetic retinopathy screening: When and how Speaker: To be confirmed	025
16:20	Lesion-aware deep learning system for diabetic retinopathy screening Speaker: W. Jia (China)	026
16:40	A large community survey on diabetic retinopathy screening  Speaker: C. Chun (China)	027
17:00	Discussion	

14:00 - 15:15	Meeting Room 1-3	
	Wound care	
	Chair: M. Ruke (India) Chair: S. Phatak	
14:00	Comparing the classifications of diabetes foot wounds  Speaker: M. Singh (India)	028
14:20	How to manage infected foot ulcers  Speaker: A.L. Costa (Portugal)	029
14:40	Types of dressing in foot wound management  Speaker: S. Seshabhattaru (India)	030
15:00	Discussion	

15:15 - 15:45	Meeting Room 1-3	
	Individualisation of blood pressure targets for people with diabetes and hypertension	
	Chair: L. Ji (China)	
15:15	ADA Speaker: A. Maheshwari (India)	031
15:25	ACC/AHA Speaker: V. Narsingh (India)	032
15:35	Discussion	

16:00 - 17:15	Meeting Room 1-3	
	Cardiovascular risk factors	
	Chair: S. Soegondo (Indonesia) Chair: U. Sriram (India)	
16:00	The endothelium in diabetes  Speaker: D. Harbuwono (Indonesia)	033
16:20	Statin use in people with diabetes: Pros and cons Speaker: To be confirmed	034
16:40	Renin-angiotensin-aldosterone system blockade in blood pressure management Speaker: To be confirmed	035
17:00	Discussion	

14:00 - 15:45 Meeting Room 4-6

## Can diet modulation help in averting chronic complications

Speaker: A. Ben Nakhi (Kuwait) Speaker: M. Al Arouj (Kuwait) 16:00 - 17:15 Meeting Room 4-6

## Prevention of foot amputation and education in the diabetic foot

Moderator: A. Bal (India)

Panellist: M. Ruke (India)
Panellist: S. Kari (India)

Panellist: V. Viswanathan (India)
Panellist: A. Sanghvi (India)

## **PROGRAMME**

# **FRIDAY 26 OCTOBER**

09:00 - 10:15	Hall 4	
	Plenary Lectures	
	Chair: A. Al Madani (United Arab Emirates) Chair: A. El Sayed (Qatar)	
09:00	Diabetes and heart failure: Perfectly imperfect truth - a future prospect Speaker: R.P. Sibarani (Indonesia)	038
09:30	Cardiovascular outcomes trials of commonly used antiglycaemic medications  Speaker: D. Rahelic (Croatia)	039
10:00	Discussion	

10:15 - 11:15	Hall 4	
	Foot treatment strategies	
	Chair: A. Ibrahim (Dominican Republic)	
10:15	Managing patients with diabetic foot and critical limb ischaemia Speaker: Z. Xu (China)	040
10:40	Offloading in a neuroischaemic foot ulcer  Speaker: V. Viswanathan (India)	041
11:05	Discussion	

11:30 - 12:30	Hall 4	
	Prevention of ulcers and amputations	
	Chair: E. Jude (United Kingdom) Chair: R. Kesavan (India)	
11:30	Preventing recurrence of the diabetic foot ulcer  Speaker: A. Bal (India)	042
11:45	Preventing amputations in the developing world: The Indian experience Speaker: S. Pendsey (India)	043
12:00	The role of educators in preventing recurrence of ulcers and amputations Speaker: S. Salis (India)	044
12:15	Discussion	

14:30 - 15:45	Hall 4	
	Diabetes and hypoglycaemia	
	Chair: L.M. Gardete Correia (Portugal) Chair: B. Saboo (India)	
14:30	Hypoglycaemia: Diagnosis and management Speaker: M. Djordjevic (Serbia)	045
14:50	Hypoglycaemia unawareness Speaker: S.R. Joshi (India)	046
15:10	Macrovascular impact of hypoglycaemia Speaker: To be confirmed	047
15:30	Discussion	

15:45 - 16:15	Hall 4	
	Hypoglycaemia	
	Chair: J. Panda (India) Chair: B.M. Makkar (India)	
15:45	Overhyped Speaker: A. Gupta (India)	048
15:55	Real Speaker: L. Rodrigues (India)	049
16:05	Discussion	

16:30 - 17:45	Hall 4	
	Diabetes and bone health	
	Chair: J. Belkhadir (Morocco) Chair: R. Chawla (India)	
16:30	Skeletal complications of diabetes Speaker: S.R. Aravind (India)	050
16:50	Osteoporosis: An under-appreciated association with diabetes  Speaker: T.M.I. Alessa (Kuwait)	051
17:10	Periodontal disease in diabetes  Speaker: L.M. Gardete Correia (Portugal)	052
17:30	Discussion	

17:45 - 19:00	Hall 4		
	Plenary lectures		
	Chair: T. Rege (India) Chair: S. Rao (India)		
17:45	The diabetic foot: An update  Speaker: E. Jude (United Kingdom)	053	
18:15	Risk factors for microvascular complications in children and adolescents with diabetes Speaker: L. Barkai (Hungary)	054	
18:45	Discussion		

10:15 - 11:15	Hall 5	
	Acute complications in diabetes	
	Chair: J. Ahmad (India) Chair: S. Sadikot (India)	
10:15	Diabetic ketoacidosis: A master class Speaker: B. Saboo (India)	055
10:40	Hyperosmolar non-ketotic coma Speaker: A.H. Zargar (India)	056
11:05	Discussion	

11:30 - 12:30	Hall 5	
	Risk factors for cardiovascular disease	
	Chair: T.K.M. Easwar (India) Chair: K. Sai (India)	
11:30	Modern management of hypertension in patients with diabetes Speaker: S.N. Narasingan (India)	057
11:45	Recent trends in treating diabetic dyslipidaemias Speaker: M. Hassanein (United Arab Emirates)	058
12:00	Novel risk factors leading to cardiovascular dysfunction Speaker: J. Belkhadir (Morocco)	059
12:15	Discussion	

14:30 - 15:45	Hall 5	
	Diabetes and the eye	
	Chair: N. Cho (South Korea) Chair: W. Jia (China)	
14:30	Aetiopathogenesis of diabetic retinopathy and diabetic macular oedema Speaker: G. Tan (Singapore)	060
14:50	Can we prevent diabetic retinopathy?  Speaker: To be confirmed	061
15:10	Management of diabetic eye disease: Current and future trends  Speaker: G. Tan (Singapore)	062
15:30	Discussion	

15:45 - 16:15	Hall 5	
	The role of telemedicine in the diagnosis of diabetic retinopathy	
	Chair: C. Chun (China)	
15:45	Useful Speaker: G. Tan (Singapore)	063
15:55	Useful with caution Speaker: To be confirmed	064
16:05	Discussion	

16:30 - 17:45	Hall 5			
	Diabetic nephropathy II			
		A. Maheshwari (India) P. Jethwani (India)		
16:30		ers to judge the onset and progression of diabetic nephropathy R. Birne (Portugal)	065	
16:50		r mechanisms on the pathogenesis of diabetic nephropathy L. Fang (China)	066	
17:10		cidney disease in patients with diabetes: Is it always diabetic nephropathy?  A. Gupta (India)	067	
17:30	Discussio	n		

10:15 - 11:15	Hall 6		
	Diabetes and the liver		
	Chair: S. Soegondo (Indonesia) Chair: T.P. Shah (India)		
10:15	Diabetes and non-alcoholic fatty liver disease  Speaker: To be confirmed	068	
10:40	Managing diabetes in chronic liver disease  Speaker: S. Singh (India)	069	
11:05	Discussion		

11:30 - 12:30	Hall 6			
	Diabetes nephropathy I			
	Chair: S. Reddy (India) Chair: A. Kaul (India)			
11:30	Novel risk factors in diabetic kidney disease  Speaker: Q. Li (China)	070		
11:45	Managing patients with progressive diabetic nephropathy: Clinical insights Speaker: R. Birne (Portugal)	071		
12:00	Managing nephropathy in resource-poor settings  Speaker: J. Ahmad (India)	072		
12:15	Discussion			

14:30 - 15:45	Hall 6			
	Reducing cardiovascular risk in patients with diabetic nephropathy			
	Chair: N. Deshpande (India) Chair: S. Jaggi (India)			
14:30	Common aspects of pathogenic mechanism for diabetic nephropathy and cardiovascular complications  Speaker: D. Rahelic (Croatia)	073		
14:50	Oxidative stress and anti-inflammatory agents in patients with nephropathy: Do they also protect the heart?  Speaker: U. Sriram (India)	074		
15:10	Cardio-renal continuum in diabetes  Speaker: S. Soegondo (Indonesia)	075		
15:30	Discussion			

15:45 - 16:15	Hall 6		
	Can type 2 diabetes patients have diabetic retinopathy in the absence of diabetic nephropathy?		
		R. Kovil (India) A. Bhansali (India)	
15:45	<b>Yes</b> Speaker:	S. Gupta (India)	076
15:55	<b>No</b> Speaker:	To be confirmed	077
16:05	Discussi	on	

16:30 - 17:45	Hall 6	
	Diabetic foot infections	
	Chair: M. Chawla (India) Chair: T. Kamat (India)	
16:30	Implementing the IDSA classification into clinical practice  Speaker: R. Kovil (India)	078
16:50	A stepwise approach to the acutely infected diabetic foot Speaker: A.L. Costa (Portugal)	079
17:10	The use of imaging to diagnose diabetic infection  Speaker: A. Rastogi (India)	080
17:30	Discussion	

10:15 - 11:15	Meeting Room 1-3		
	Autonomic neuropathy		
	Chair: L. Rodrigues (India) Chair: B. Sosale (India)		
10:15	Cardiac autonomic neuropathy Speaker: J. Belkhadir (Morocco)	081	
10:30	Gastro-intestinal tract dysfunction in diabetic autonomic disorders  Speaker: S. Phatak	082	
10:45	The urinary bladder in autonomic dysfunction  Speaker: A.S. Bhoraskar (India)	083	
11:00	Discussion		

11:30 - 12:30	Meeting Room 1-3	
	The mind should never be forgotten	
	Chair: J. Panda (India) Chair: J. Kesavadev (India)	
11:30	The relationship between depression and diabetes: Causal or casual? Speaker: A. Jagdeesha (India)	084
11:45	The association between type 2 diabetes, obesity and brain dysfunction Speaker: P. Vardi (Israel)	085
12:00	Cognitive dysfunction in diabetes  Speaker: U. Dhruv (India)	086
12:15	Discussion	

14:30 - 15:45	Meeting Room 1-3			
	Nutrition			
	Chair: S. Salis (India) Chair: S. Shah (India)			
14:30	Diabetes and heart disease: Which fats to eat?  Speaker: T. Milenkovic (Macedonia)	087		
14:50	Nutritional interventions in patients with diabetes  Speaker: A. Misra (India)	088		
15:10	Impact of regional variation of diet on diabetes complications  Speaker: V. Nambiar (India)	089		
15:30	Discussion			

15:45 - 16:15	Meeting Room 1-3		
	Should a low-card, high-fat diet be used in patients with diabetes complications?		
	Chair: J. Srinath (India) Chair: V. Nambiar (India)		
15:45	<b>Yes</b> Speaker: S. Joshi (India)	090	
15:55	No Speaker: R. Gupta (India)	091	
16:05	Discussion		

16:30 - 17:45	Meeting Room 1-3			
	Footwear			
	Chair: T. Rege (India) Chair: H. Chandarana (India)			
16:30	Footwear for people at high risk of diabetic foot  Speaker: S. Pendsey (India)	092		
16:50	The role of insoles for prevention of foot problems in diabetes  Speaker: J. Kannampilly (India)	093		
17:10	What after amputation: Recommendations for rehabilitation and prostheses Speaker: V. Viswanathan (India)	094		
17:30	Discussion			

#### 10:15 - 11:15 Meeting Room 4-6

## Heart failure in diabetes: Is it different and how do we manage it?

Moderator: S.C. Agarwal (India)

Panellist: S. Tanna (India)

Panellist: D. Harbuwono (Indonesia) Panellist: R.P. Sibarani (Indonesia)

11:30 - 12:30	Meeting Room 4-6  Gadgets for the diabetic foot		
	Chair: A. Ibrahim (Dominican Republic) Chair: A. Bal (India)		
11:30	Monofilament, vibration perception threshold and tuning fork  Speaker: M. Choudhari Kale (India)	095	
11:45	Vascular Doppler and ankle-brachial index Speaker: H. Chandarana (India)	096	
12:00	Pressure plate analysis Speaker: V. Vachharajani (India)	097	
12:15	Discussion		

14:30 - 16:15	Meeting Room 4-6  Diabetes and sexual dysfunction		
	Chair: P. Jethwani (India) Chair: S. Rao (India)		
14:30	Erectile dysfunction Speaker: Y. Vardi (Israel)	098	
15:00	Let's talk female sexual dysfunction  Speaker: D. Jumani (India)	099	
15:30	Psychosocial aspects of sexual dysfunction in people with diabetes Speaker: M. Bhartia (India)	100	
16:00	Discussion		

16:30 - 17:45 Meeting Room 4-6

Importance of social media and communications in education and prevention of diabetic complications

Moderator: S. Jothydev (India)

Panellist: J. Kesavadev (India)
Panellist: D. Rahelic (Croatia)
Panellist: G. Krishnan (India)

## **PROGRAMME**

# **SATURDAY 27 OCTOBER**

09:00 - 10:15	Hall 4	
	Plenary lectures	
	Chair: J. Ahmad (India) Chair: E. Jude (United Kingdom)	
09:00	Classifications of diabetic neuropathy: How clinically useful are they?  Speaker: R. Malik (Qatar)	101
09:30	The importance of team management for the diabetic foot: Equal roles of the diabetologist, vascular surgeon and podiatrist  Speaker: A. Ibrahim (Dominican Republic)	102
10:00	Discussion	

10:15 - 11:15	Hall 4	
	Trending	
	Chair: L. Rodrigues (India) Chair: A.H. Zargar (India)	
10:15	Do sex and gender play a role in diabetes complications?  Speaker: M. Bhartia (India)	103
10:40	Prevention of diabetes complications: How early should we start?  Speaker: A. El Sayed (Egypt)	104
11:05	Discussion	

11:30 - 12:30	Hall 4	
	Other complications	
	Chair: S.R. Joshi (India) Chair: S.R. Aravind (India)	
11:30	Diabetes and cerebrovascular disease Speaker: C. Vasanth Kumar (India)	105
11:45	Diabetes and skin manifestations Speaker: V.K. Mittal (India)	106
12:00	Diabetes and cancer Speaker: M. Chawla (India)	107
12:15	Discussion	

14:30 - 16:15	Hall 4	
	Treatment of complications	
	Chair: W. Jia (China) Chair: U. Sriram (India)	
14:30	Time to overcome multifactorial therapeutic inertia  Speaker: B. Saboo (India)	108
15:00	Use of newer technologies in patients with diabetes complications  Speaker: R. Mehta (India)	109
15:30	Antihyperglycaemic drugs and their impact on diabetic complications  Speaker: D. Rahelic (Croatia)	110
16:00	Discussion	

10:15 - 11:15	Hall 5	
	Treatment of diabetic foot	
	Chair: A. Ibrahim (Dominican Republic) Chair: E. Jude (United Kingdom)	
10:15	Managing Charcot's foot Speaker: A.L. Costa (Portugal)	111
10:40	A team-based approach to managing the diabetic foot Speaker: V. Viswanathan (India)	112
11:05	Discussion	

11:30 - 12:30	Hall 5	
	Lectures	
	Chair: C. Vasanth Kumar (India) Chair: R. Sahay (India)	
11:30	Targets for glycaemia, dyslipidaemia and hypertension: How low should we go? Speaker: S. Reddy (India)	113
12:00	Prevalence and screening for complications in youths with diabetes  Speaker: L. Barkai (Hungary)	114

14:30 - 16:15	Hall 5	
	Newer updates	
	Chair: C. Chun (China) Chair: M. Djordjevic (Serbia)	
14:30	Is brain islet implant a potential treatment for Alzheimer's disease?  Speaker: P. Vardi (Israel)	115
15:00	Islet transplants: Now and later Speaker: J. Kesavadev (India)	116
15:30	Stem cell therapy Speaker: A. Bhansali (India)	117
16:00	Discussion	

10:15 - 11:15	Hall 6	
	Cardiovascular complications	
	Chair: J. Belkhadir (Morocco) Chair: M. Djordjevic (Serbia)	
10:15	Does an obesity "paradox" exist for cardiovascular dysfunction?  Speaker: T.P. Shah (India)	118
10:40	Diabetic cardiomyopathy: Fact or fiction?  Speaker: K. Tripathi (India)	119
11:05	Discussion	

11:30 - 12:30	Hall 6		
	Is universal salt restriction useful in preventing cardiovascular complications?		
	Chair: V. Nambiar (India) Chair: R. Gupta (India)		
11:30	There is evidence Speaker: S. Shah (India)	120	
11:50	The evidence does not stand up to scrutiny  Speaker: J. Srinath (India)	121	
12:10	Discussion		

### 14:30 - 16:20 Hall 6

### **Oral Presentations - Diabetic Foot**

Chair: To be confirmed	
<b>14:30</b> Characteristics of young Indigenous patients admitted with diabetic foot disease to a major Northern Australian hospital  J. Anderson, P. Lazzarini, N. Nandi, A. Mclean, S. O'rourke, A. Sinha	122
<b>14:40</b> Effect of foot temperature controlling unit on diabetes patients' blood glucose level H. Hyungseob, S. Euiseong, L. Seungtaek, P. Sangkeon, J. Suwang, S. Kyoung-Young, W. KIM, S. Laiwon	123
14:50 Index of plantar pressure alters with prolonged diabetes duration <u>L. Xu</u>	124
<b>15:00</b> First new drug with over 60% complete wound closure in diabetic foot ulcers from phase III trial interim analysis report S.C. Chang, <u>I.C. Chen</u>	124b
<b>15:10</b> Detection of irregular first metatarsal lengths to prevent diabetic plantar ulceration - an application for telemedicine <u>A.T. Thompson</u> , B. Zipfel, M. Muzigaba, C. Aldous	125
<b>15:20</b> Correlation between basal metabolic rate & insulin resistance among type 2 diabetes mellitus with peripheral neuropathy <u>S.K. Amaravadi</u> , A.M. Gundmi, S. Ba, V. K	126

14.30 - 10.20 Hall 0	14:30 -	16:20	Hall 6
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<b>15:30</b> Role and place of X-ray endovascular procedures in treatment of diabetic foot syndrome <i>S. Ismailov, T. Kamalov</i>	127
<b>15:40</b> Mapping research and innovation activities in diabetic neuropathy: a case of diabetic-foot resear <u>S.K. Jena</u> , B. Mishra, A. Yadav, P. Desai	rch in India 128
<b>15:50</b> Combining diabetic foot and eye screening - a feasibility study  J. Lewis, K. Hutchinson	129
<b>16:00</b> Relationship between prognosis of diabetic foot lesion and hemodialysis in Japanese <i>T. Hiyoshi, M. Yoshitsugu</i>	130
<b>16:10</b> End-stage vascular disease in 10 patients treated with adipose-derived stromal vascular fraction: 3 year outcomes study  M. Carstens, R. Cortes, A. Gómez, D. Correa	: 131

10:15 - 11:15	Meeting Room 1-3
	Obesity
	Chair: D. Kapoor (India) Chair: T. Milenkovic (Macedonia)
10:15	Diabesity: The clinical concern  Speaker: S.R. Joshi (India)  132
10:40	Metabolically obese normal weight phenotype  Speaker: B.M. Makkar (India)  133
11:05	Discussion

11:30 - 12:30	Meeting Room 1-3	
	Surgical approach to diabetic foot ulcers	
	Chair: R. Kesavan (India) Chair: T. Rege (India)	
11:30	For prevention Speaker: S. Bhandari (India)	134
11:55	Management of high risk diabetic foot  Speaker: M. Ruke (India)	135
12:20	Discussion	

### 14:30 - 16:15 Meeting Room 1-3

### Oral presentations - Kidney, eye, cardiovascular complications

Chair: S.R. Joshi (India)
Chair: S. Rao (India)

### 14:30

Individualized prevention and treatment strategy based on HOMA2 in clinical practice in type 2 diabetes patients

136

K. Dolianitis, D. Karasavvidou, Z. Lazovits, D. Makridis, A. Didaskalou, D. Tsalikakis, A. Filippidou, A. Vagkopoulou, N. Chantant, A. Zampeta, K. Stylianou, C. Katsinas

### 14:40

High rate of diabetic limb amputation in Indigenous Australians on dialysis: a wake-up call for diabetes prevention

137

<u>U. Malabu</u>, R. Gilhotra, V. Vangaveti, G. Kan

### 14:50

The impact of moving diabetic eye screening from the eye to the diabetic clinic in a Tanzanian setting *R. Kessy, C. Mhina, A. Sanyiwa, F. Chiwanga, J. Kilemile, D. Mabey, E. Johnson, A. Dale* 

### 15:00

Study of coronary risk factors in type 2 diabetes male patients having erectile dysfunction (ED)

<u>S.C.S. Dutta</u>

### 15:10

Phenotype differences between type 1 and type 2 diabetes in patients with a long evolution of the disease

O.A. Parliteanu, I.R. Voicu, A.E. Nica, C. Topea, G. Baraghin, C. Dobjanschi, G. Radulian

### 15:20

Burden of cardiovascular risk factors in ultrasonographically diagnosed cases of non-alcoholic fatty liver disease 141 <u>D.S. Chatterjee</u>, S. Kunti, D. Maitra, I. Chakraborty, B. Majumder

### 15:30

Cystatin C as a marker of glomerular filtration rate in type 2 diabetic nephropathy

142

P. Gyawali, B. Jha, K. Raut

15:40	
Evaluation of circulating Omentin-1, Apelin and Chemerin as novel biomarkers of diabetic retinopathy	
in T2DM patients	143
M. Yasir, G.P. Senthilkumar, K.R. Babu, M. Vadivelan	
15:50	
Day-to-day glycemic variability and the incidence of MI complications in the first 72 hours post MI in	
diabetic patients	144
R. Contreras, D. Mejía, <u>A. Ibrahim</u>	
16:00	
Serum level of fibronectin in hypertensive patients with type 2 diabetes and obesity	145
<u>O. Mogylnytska</u> , L. Mohylnytska	
<del></del>	

10:15 - 11:15 Meeting Room 4-6

### Insulins and other injectables in managing diabetes and its complications

Moderator: To be confirmed

Panellist: To be confirmed

Panellist: L.M. Gardete Correia (Portugal)

Panellist: J. Kesavadev (India)

SATURDAY

11:30 - 12:30 Meeting Room 4-6

### The clinical approach to managing a person with early nephropathy

Moderator: R. Birne (Portugal)

Panellist: D. Rahelic (Croatia)
Panellist: Q. Li (China)
Panellist: J. Ahmad (India)
Panellist: L. Fang (China)

### 14:30 - 16:15 Meeting Room 4-6

### **Oral presentations - Diabetes complications**

Chair:	S. Gupta (India)
Chair:	A. Gupta (India)

### 14:30

Baseline Data of the Mongolian Diabetes Study (MONDIA)

A. Khasag, E. Yanjmaa, E. Dulamjav

146

### 14:40

Lifestyle factors and macro- and micro-vascular complications among people with type 2 diabetes in Saudi Arabia

M. Alramdan, D.J. Magliano, H.A. Alhamrani, A.J. Alramadan, S.M. Alameer, G.M. Amin, W.A. Alkharras, N.A. Bayaseh, B. Billah

### 14:50

Preventing diabetes complications with telemedicine - Insights gained from a real-world 20 year follow-up data 148 *J. Kesavadev, A. Shankar, A.D. Ashok, G. Krishnan, N.A. Ajai, G. Sanal, J. Ajith, S. Jayanthi, L. Ramachandran, S. Jothydev* 

### 15:00

The prevalence of diabetic retinopathy in China: A nationwide survey with artificial intelligence-based cloud platform

149

B. Yang, J. Liu, H. Pan, L. Chen, L. Zhang, Q. Li, Y. Xue, Q. Wang, J. Kuang, L. Chen, F. Wang, N. Wang

### 15:10

Data of anti-diabetic drugs in patients with renal impairment at the time of FDA approval

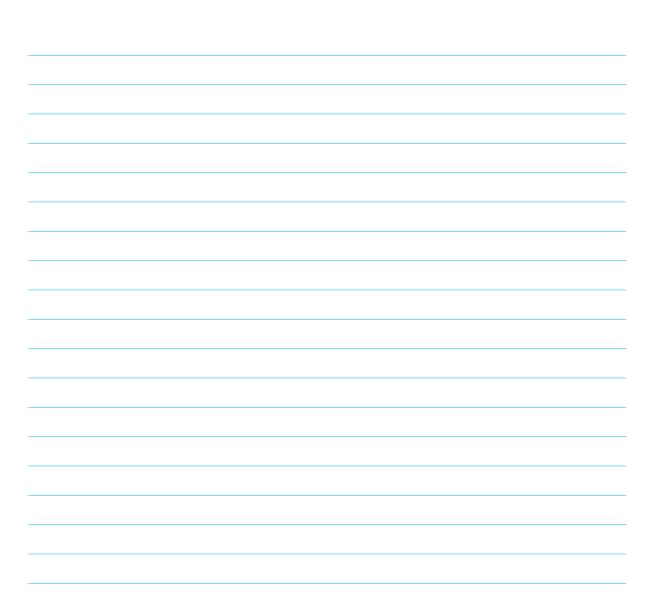
A. Rajani, D. Gude, R. Jha, M. Fegade, D. Ts

### 15:20

Increased proportion of gram-negative bacteremia in diabetic patients: A retrospective analysis

S. Kassem, Y. Shihadeh

<b>15:30</b> Leisure physical activity in past is significant predictor of cardiac autonomic neuropathy in type 2 diabetes mellitus <i>P. Bhati, J.A. Moiz, M.E. Hussain</i>	152
<b>15:40</b> Impact of ≥7% weight loss in the management of non-alcoholic fatty liver disease in type 2 diabetics <i>K. Roy, U. Iyer, R. Shah, T. Vaishnav</i>	153
<b>15:50</b> Subclinical cardiac autonomic dysfunction in type II diabetes mellitus <u>A. John</u> , S. Avangapur, S. Magadi Umeshchandra, K. Udupa, P. Vasuki, A. Mahadevan, R.A. Kumar, M. Shekhar, S. Talakad N	154
<b>16:00</b> Diabetic autonomic neuropathy in the pathogenesis of vascular complications <i>I. Kurnikova, P. Ogurtsov, R. Sargar</i>	155



**POSTER DISPLAY** 

**25-27 OCTOBER** 

Posters will be on display as of 14.00 on Thursday 25 October.

Authors of odd-numbered posters will be at their posters from 12.30 to 14.30 on Friday 26 October.

Authors of even-numbered posters will be at their posters from 12.30 to 14.30 on Saturday 27 October.

### **Foot - Diabetic Peripheral Neuropathy and Charcot**

Validation of "SPARSH"- innovative new device for the early detection of diabetic peripheral neuropathy  M. Arun (India)	P-001
Vascular and neurological impairment in patients with type 2 diabetes mellitus and foot ulcer <u>P. Ganji,</u> A. Sachan, V. B, S. V, M. Y (India)	P-002
One year review of diabetes patients attending to foot clinic at Yangon General Hospital Z.C. Pyone, K.S. Than, M.W. Aung (Myanmar Burma)	P-003
The organizational structure of specialised help to patient with diabetic foot syndrome in Uzbekistan  N. Ibragimova, T. Kamalov, K. Shakirov, L. Kokareva, O. Platonova (Uzbekistan)	P-004
Evaluation and follow-up of patients with type 2 diabetes: The importance of Screen, Treat, Educate and Prevent (STEP) <u>D.A. Padhye</u> , A. James, J. Pawar, S. Sudhakaran, N. Pathare (India)	P-005
Continuous Glucose Monitoring (CGM) as additional tool in assessment of polyneuropathy risk in type 2 diabetes T. Totomirova, I. Daskalova, M. Arnaudova (Bulgaria)	P-006
Clinical and biological particularities of type 2 diabetic patients diagnosed with polyneuropathy  A.E. Nica, G. Baraghin, C. Topea, I.V. Vinereanu, O.A. Parliteanu, C. Dobjanschi, G. Radulian (Romania)	P-007
Diabetic foot risk assessment of patients with type II diabetes in a Tertiary hospital in Nairobi, Kenya  J. Nduati Ngoyo, S. Gatimu, E.W. Njenga (Kenya)	P-008
Peripheral neuropathy: prevalence, determinants and effect of patients' diabetes knowledge on peripheral neuropathy  O. Ezeajughi, V. Odili, J.F. Chukwu (Nigeria)	P-009

OPD experience of diabetic peripheral neuropathy in new onset diabetes – an observation study <u>R. Mohammed</u> , I. Ahmed, R.K. Jaiswal (India)	P-010
Safety and efficacy of pregabalin and amitriptyline for painful diabetic neuropathy and quality of life of patients <u>S. Chandni</u> , A. U Thejkumar, N. Manikath, B. George, S. Sadan E (India)	P-011
Correlation between VPT and ratio of forefoot PPP and rearfoot PPP in patients with type 2 diabetes mellitus  M. Choudhari Kale, A. Vaidya (India)	P-012
Peripheral neuropathy risk in T2DM patients through assessment of vibration perception threshold: a screening report <u>S. Shah</u> , J. Balaji, K. Dash, H.R. Boda, J. Sai, D. Cs, U. Ayyagari, S. Das, R.K. Kshirsagar, N. Shivashankarappa, S. Tippisetty, V.K. Kolukula (India)	P-013
Prevalence of peripheral neuropathy in type 2 diabetes with postmenopausal osteoporosis in Udupi District <u>S. Gundmi</u> , A.G. Maiya, A.K. Bhat (India)	P-014
Hydrogels as an alternative treatment for callus formation in diabetes foot ulcers: a report of three cases <u>S. Anisah</u> , A. Wibudi, S. Setyowati, N. Magfira (Indonesia)	P-015

### **Foot - Peripheral Arterial Disease**

Prevalence of peripheral arterial disease among type 2 diabetes mellitus in coastal Karnataka <u>E. Arora</u> , A. Maiya, T. Devasia, R. Bhat, G. Kamath (India)	P-016
Correlations between parameters of regional hemodynamics in patients with neuroischemic form of diabetic foot syndrome <u>T. Kamalov</u> , S. Ismailov (Uzbekistan)	P-017
The indicating value of ankle-branchial index screening for the cardiovascular disease in type 2 diabetes patients <u>L. Xu</u> , R. He, Z. Hui, L. Lianxi, L. Fang, J. Weiping	P-018
Can inherited thrombophilia influence the effect of autologous cell therapy in patients with ischemic diabetic foot?  M. Dubsky, A. Nemcova, A. Jirkovska, R. Bem, V. Fejfarova, J. Hazdrova, K. Sutoris (Czech Republic)	P-019
A study on ABI and TBI in type 2 diabetes mellitus patients with PAD and their correlation with CIMT <u>B. Santosh</u> , R. Boddula, D. Prabakar, A. Venkatanarasu, C. Chinte, V. Tickoo (India)	P-020
Development and validation of a risk prediction score for lower extremity arterial disease in patients with diabetes X. Zhang, Z. Xu, X. Ran, L. Ji (China)	P-021
The effectiveness of kinesiotaping in the treatment of edema in diabetic patients M. Prystupiuk, M. Borošak, I. Onofriichuk, L. Prystupiuk, L. Naumova, M. Naumova (Ukraine)	P-022

### **Foot - Ulcers and Infection**

Placement of forefoot bend in women's shoes – a risk factor for ulceration in diabetes. <u>A.T. Thompson</u> , C. Aldous, B. Zipfel, M. Muzigaba (South Africa)	P-023
Links between oral health and diabetes: The mouth as early warning system <u>A. Choudhury</u> (Bangladesh)	P-024
Treatment of necrotizing fasciitis with combined longitudinal incision and NPWT in diabetic patients <u>G. Vadasz</u> , I. Rozsos (Hungary)	P-025
Relationship between serum magnesium and complications of diabetes in type 2 diabetes mellitus patients <u>A. Gupta</u> , S. Abbas (India)	P-026
Analysis of ipsilateral and contralateral foot through amit jain's triple assessment for foot in diabetes  S. Jabbar, A. Jain, G. S (India)	P-027
Prevailing practices, attitudes & opinions regarding diabetic foot ulcer among health professionals in South India  M. Aleemuddin, F. Farishta, V. Srinivas (India)	P-028
Diabetic foot self-care practice among patients with type 2 diabetes mellitus in a tertiary hospital in Indonesia  I.A. Paramitha, M.I. Mokoagow, M. Epriliawati, N. Soebijanto (Indonesia)	P-029
Risk factors for foot ulcer in individuals with diabetes mellitus - a case control study W. Ahmed N, P. G Pai, T. Sa (India)	P-030
Impact of HBOT on angiogenic factors and its molecular targets in both tissue biopsy and circulation of DFU  R. Kesavan, D. Umapathy, S.S. Changam, V. Ramachandran, R. Kunka Mohanram (India)	P-031

Negative pressure wound therapy in diabetic root uicer, Mauritius <u>A. Jodheea-Jutton</u> , A. Bhaw-Luximon, S. Hindocha (Mauritius)	P-032
Is social deprivation associated with amputation risk secondary to diabetic foot disease?  J. Hayes, J. Stephens, S. Bain, C. Topliss, R. Thomas, D. Price (United Kingdom)	P-033
Preventive diabetic foot program – an experience of district patient organization <u>I. Daskalova</u> , T. Totomirova (Bulgaria)	P-034
MBL and ESBL producing Acinetobacter species isolates causing amputation in diabetic foot ulcer infections <u>D.M. Khan</u> , M.S. Moosabba, I.R. Venkatakrishna (India)	P-035
An investigation of mortality and foot morbidity following minor foot amputations in patients living with diabetes  I.M. Vassallo, A. Gatt, K. Cassar, C. Formosa (Malta)	P-036
Role of documenting serial images in diabetic foot ulcer management <u>V. Gadadharan</u> , S. K (India)	P-037
Characteristics of diabetic foot lesions in Japanese elderly <u>T. Hiyoshi,</u> M. Yoshitsugu (Japan)	P-038
The prevalence of diabetic foot ulcers and associated risk factors among patients with type 2 diabetes mellitus <u>T.S. Tun</u> , S.T. Tun, P.M.M. Min, K.W. Tun, T. Kyaw (Myanmar Burma)	P-039
MicroRNA-23c suppresses angiogenesis by targeting tissue specific angiogenic factors among diabetic foot ulcer <u>A. Karan Naresh</u> , U. Dhamodharan, R. Vimal Kumar, K. Rajesh, K.M. Ramkumar (India)	P-040
Study of the effect of negative pressure on the formation of new vessels in the ulcer in patients with diabetic foot  M. Prystupiuk, I. Onofriichuk, L. Prystupiuk, L. Naumova, M. Naumova (Ukraine)	P-041
Pharmacotherapy, clinical outcomes and quality of life in patients with diabetic foot syndrome: a cross sectional study  E. Pasangha, P. Devi, B. George, B. Kb (India)	P-042

A study on awareness of foot care and foot related problems among patients with diabetes mellitus <u>A. Venkatanarasu</u> , R. Boddula, B. Santosh, C. Chinte, V. Tickoo, J. Durgam, S. Durgam (India)	P-043
Regeneration medicine for cure of diabetic foot ulcer with herbs by genetic transription <u>K. Chilukuri</u> (India)	P-044
A scientific approach to improve the lifestyle of patients with diabetic foot ulcer <u>P. R.</u> , S. Gnanasundaram, S.B. Giridharan, B.N. Das, V. Viswanathan (India)	P-045
One man team approach for diabetic foot amputation prevention <u>K. Shankhdhar</u> (India)	P-046
The Samadhan System of offloading the diabetic foot.  K. Shankhdhar, S. Shankhdhar (India)	P-047
Bone resorption maker —lysylpyridinoline: a novel test for diagnosing diabetic foot osteomyelitis — a preliminary report <u>U. Malabu</u> , O. Hayes, V. Vangaveti (Australia)	P-048
Characteristics and prognosis of patients with diabetic foot ulcer admitted at a time in a diabetic foot care center <u>G.K. Sreehari</u> , A. Vijayakumar, V. Gadadharan, S. Krishnakumar, R. Vijayakumar (India)	P-049
Quantitative analysis of plantar fascia biomechanical parameters in diabetic patients using myotonometry  H. S., A. Srivatsa, L.L. S., S. Ramakrishnan (India)	P-050
Investigating the use of low frequency ultrasonic debridement in the treatment of diabetic foot ulcers <u>L. Michailidis</u> , S. Bergin, C. Williams, T. Haines (Australia)	P-051
Practise of diabetic foot care in a rural, tier-2 town in South India <u>P. Parthasarathi</u> (India)	P-052
Malagasy beliefs and diabetic foot  H.A. Ramamonjisoa, E. Ramahandrisoa, C. Rakotonirina, F. Rakotoarisoa, M. Rakotoarimanana, J. Ramarolahy, J. Ratsitratrinihafa, B. Razafindrakoto, A. Ravonison, T. Rajaonarison, J.P. Assal, G. Ramahandridona (Madagascar)	P-053

Comparative study of diabetic foot infection with levels of HbA1c and their susceptibility pattern  D.M. Khan, F.R. Menzes, M.S. Moosabba, I.V. Rao (India)	P-054
Efficacy of Curcuma longa (SNEC 30) in the management of diabetic foot in patients of type 2 diabetes mellitus <u>V. Awasthi 09</u> , N. Verma, A. Verma, A. Maheshwari, G. Lamgora (India)	P-055
Progression of foot complications among patients with type 2 diabetes in Singapore <u>T. Riandini</u> , M.P. Toh, D.Y. Liu, C.S. Tan, K. Venkataraman (Singapore)	P-056
Knowledge of diabetic foot and its risk factors among the residents of Pokhara Valley, Nepal: a descriptive study  B. Sathian, A. SINGH, S.H. Subramanya, B. Roy, A. Ghosh, I. Banerjee (Nepal)	P-057
Annual assessment of the spectrum of pathogenic microorganisms in infected diabetic foot ulcers in a tertiary center  J. Mader, W. Haas, A. Ajsic, O. Malle, M. Pandis, T.R. Pieber, R. Krause, H. Sourij, T. Valentin (Austria)	P-058
Increasing access to foot care for the through a community based diabetes health program for diabetes in the Philippines  M. Ruiz (Philippines)	P-059
Clinical profile and associated factors of wound complications in diabetic foot ulcer - Jakarta, Indonesia <u>W. Wiyono</u> , I.A. Kshanti, N. Magfira (Indonesia)	P-060
Amit Jain's classification for diabetic foot - the newly proposed universal classification supreme for diabetic foot  A.K.C. Jain, A. Hc, K. Kumar, S. Kumar, H. Kumar (India)	P-061
Topical wound oxygen therapy towards mitigation of financial burden of diabetic foot ulcer disease in India  N. Muduli (India)	P-062

### **Cardiovascular Risk Factors**

Clinical study to determine efficacy of trigonella foenum-graecum extract in patients with type 2 diabetes  A. Goel (India)	P-063
A study to assess prevalence of diabetes mellitus and its associated risk factors among adult residents of Urban Khammam <u>N. Karlapudi,</u> D. Nallamothu (India)	P-064
Analeptic effect of vitamin B6 on hyperglycemia, oxidative stress and DNA damage in alloxan induced diabetic rats ( <u>Abdullah</u> , N. Imrana (India)	P-065
Eligibility criteria of SGLT2i CVOTs within DISCOVER Study: Implications for type 2 diabetes population in India <u>A. Mithal,</u> S. Kalra	P-066
The efficacy of DSMSET to the predictors of health behaviors and HbA1C: basis for prevention of DM complications  R. Custodio, J.N. Victorino, M.R.J. Estuar (Philippines)	P-067
Cholecalciferol improves insulin resistance and sensitivity in type 2 diabetic patients M. Abd El-Ghany, M. Ghonem, J. Mazroa, N. El-Mashad, M. Abdul-Aziz (Egypt)	P-068
Treating the aetio-pathophysiology of diabetes - the ayurveda perspective <u>D.Z. Buch</u> , R. Vasudevan (India)	P-069
mproving the cascade of care for hypertension and diabetes: The HealthRise Project  N. Chaudhury (USA)	P-070
An epidemiological study of diabetes and its complications amongst urban and rural adult population of Lucknow district	P-071

HbA1c level in people with type 2 diabetes newly diagnosed during active screening <u>A. Alieva</u> , S. Ismailov, G. Rakhimova (Uzbekistan)	P-072
HbA1c level in people with type 2 diabetes newly diagnosed during active screening <u>A. Alieva</u> , S. Ismailov, G. Rakhimova (Uzbekistan)	P-073
Changes of leukocyte telomere reflecting extreme cardio-cerebral vascular events in diabetic patients  Y. Yang, J. Liu (China)	P-074
Investigation of hypertension incidence and genetic risk factors in diabetic patients F. Du, <u>D. Bin Hong</u> , W. Wei Min, W. Dan (China)	P-075
Relationship between hypertriglyceridemic waist phenotype and metabolic risk factors in adult population  N. Verma, H. Reddy, S. Saxena, S. Mishra, R. Saini (India)	P-076
Cardiovascular (CV) risk factor profile of young Indian type 1 diabetes patients <u>A. Baptist</u> , S. Shah, R. Thigale, S. Degloorkar, K. Jog, S. Salvi, C. Yajnik (India)	P-077
Anti-diabetic activity of curcumin, quercetin and comparison with pioglitazone in streptozocin induced diabetic rats <u>D.D. Mukerjee</u> , S. Khattri (India)	P-078
Arterial hypertension in patients whith diabetes taking anabolic steroids with progestine activity  P. Popov, I. Kurnikova (Russia)	P-079
Relationship of bacteria Akkermansia muciniphila with metabolic syndrome in ecuadorian workers <u>B. Maggi</u> , H. Torres, O. Aníbal, D. Nardy, J. Monserrate (Ecuador)	P-080
Study on patient's demographics, on Teneligliptin combination therApy in Real world practice with Metformin. (STAR-2)  D. Patel, B. Saboo (India)	P-081

### **Coronary Heart Disease and Heart Failure**

Total Events of HFpEF in patients with type 2 diabetes treated in internal medicine clinics in Bogor, Indonesia

M. Taradika, R.P. Sibarani (Indonesia)

P-082

### **Diabetic Eye Disease**

Impact of counselling and annual dilated retinal examination in preventing blindness in a tertiary care diabetic centre  M. Thiruvillamalai, S. Easwar (India)	P-083
omparative analysis of the screening and register data on diabetic retinopathy prevalence in Uzbekistan  N. Ibragimova, N. Normatova, R. Trigulova (Uzbekistan)	P-084
Eye of horus on early-stage diabetic retinopathy: automated diabetic retinopathy screening system based on deep learning <u>L. Wu</u> , C. Dai, L. Dai, H. Li, R. Fang, K. Zhang, C. Cai, Y. Shen, X. Wang, Q. Wu, B. Sheng, W. Jia (China)	P-085
Prevalence of diabetic retinopathy in type 2 DM patients attending a diabetes clinic in South Central India  M. Choudhari Kale (India)	P-086
Diabetic retinopathy and thyroid dysfunction - An association R.R. Mudhol, S. V. Turamari, R. Mudhol (India)	P-088
Diabetes can repeatedly attack the eye and face <u>A. Dey</u> (India)	P-089

### **Diabetes and Kidney Disease**

Dapagliflozin in the management of T2DM: a real world evidence study in indian patients— interim analysis of 500 patients <u>V. Viswanathan</u> , K.P. Singh (India)	P-090
Glycaemic control in 3140 participants with T2DM initiating second-line therapy: the DISCOVER study, India subset <a href="S. Kalra">S. Kalra</a> , K.P. Singh, A. Mithal (India)	P-091
Association of polymorphism of adiponectin gene with concentration of adiponektin in blood in patients with type 2 DM  Z. Akhmedova, N. Heydarova, S. Orujeva (Azerbaijan)	P-092
Effect of Tibetan Triphala medicine on Wnt/ -catetin signaling pathway and incretin <u>F. Shandan</u> (China)	P-093
Effectiveness and safety of Teneligliptin in Indian patients with diabetic kidney disease R. Kumar, A. Rathod, <u>S. Suryawanshi</u> (India)	P-094
The effect of miR-877-3p on apoptosis of renal tubular epithelial cells in diabetic kidney disease  M. Zou, Y. Jia, M. Xue, F. Hu, Z. Zheng, Y. Yang, Y. Xue (China)	P-095
Nutritional illiteracy among gestational diabetes women of Kerala: a missed way to prevent early DKD <u>U.V. Sankar</u> (India)	P-096
Egr1 mediates LncRNA Arid2-IR to promote extracellular matrix production in diabetic kidney disease Y.L. Yang, Y. Xue (China)	P-097
Experiential learning, high blood sugar and kidney model through diabetes care  B. Wongprasert (Thailand)	P-098

Inhibition of PHLPP1 by Morin contributes to FoxO1 degradation through Nrf2/MDM2	
axis during diabetic nephropathy	P-099
A. Mathur, V.K. Pandey, M.F. Khan, P. Kakkar (India)	
Attenuation of diabetic nephropathy by a traditional formulation from Ayurveda Y. Kulkarni, S. Suryavanshi, M. Garud, K. Barve, V. Addepalli, S. Utpat (India)	P-100
Attenuation of diabetic nephropathy by Formononetin-an isoflavone in experimental animals <u>M. Oza</u> , Y. Kulkarni (India)	P-101

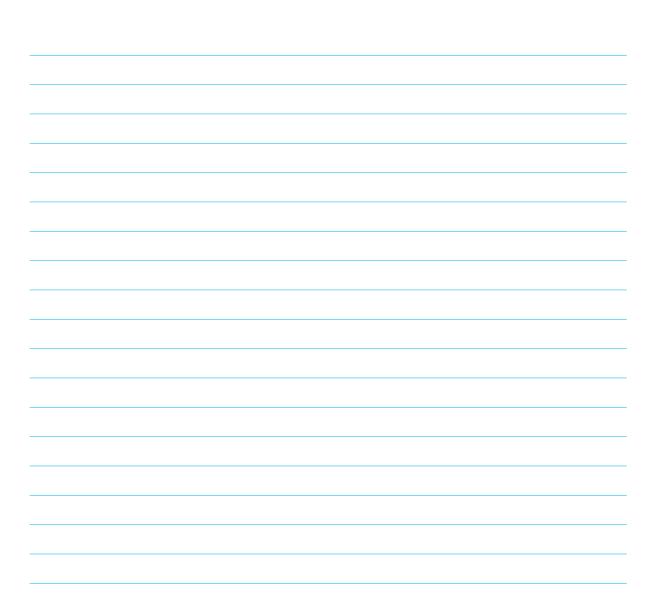
### **Diabetes Complications**

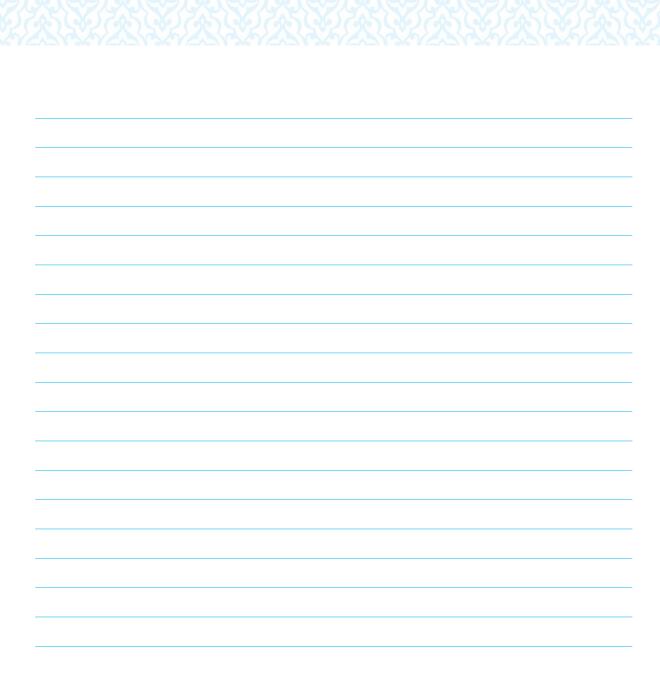
A possible effect of canagliflozin on thyroid function tests: A pilot study <u>H. Ghazi</u> (Egypt)	P-102
.iraglutide improves nonalcoholic fatty liver disease (NAFLD) via MiR-124a/ATGL/Sirt1 pathway <u>C.J. Li</u> (China)	P-103
A study of GLP-1 treating obese type 2 diabetic patients with long course of disease and the variations of Visfatin  8. Duan, C. Xiang (China)	P-104
The clinical application of dynamic blood glucose monitoring after diabetic ketoacidosis ( <u>. Liu</u> , B. Duan, D. Wang, B. Liu, R. Zhang (China)	P-105
Study of prevalence, knowledge of diabetic complications and its associated factors amongst patients attending OPD <u>D.A. Arun</u> , A.K. Gupta, P.K. Gupta (India)	P-106
niRNA-124-3p facilitates differentiation of mouse hepatocytes into IPCs in combination with small molecules <u>. Liu</u> (China)	P-107
Replicable and sustainable model of holistic diabetes care <u>6. Zia</u> , Z. Hasan, S. Anwar (United Arab Emirates)	P-108
Early awreness of diabetes prevents complications <u>P. Wal,</u> A. Wal, A. Rai (India)	P-109
Role of metabolic sensing pathway in the pathogenesis of diabetes A.M. Philips, N. Khan (India)	P-110
Studies on modulation of FGF21 in high sucrose diet fed obese prediabetic rats  5. Kondeti. D.Y. Durgam. M.P. Samala. N.M. Merugu. R.R. Kalashikam (India)	P-112

Efficacy of Curcuma longa in the management of periodontitis in patients of type 2 diabetes mellitus	P-113
<u>D.S. Rastogi</u> , N. Verma, A. Verma, A. Maheshwari, G. Lamgora (India)	
Burden of diabetes complications on hospitalisation and healthcare cost in Bangladesh <u>A. Afroz</u> , N. Hossain, K. Alam, L. Ali, D.J. Magliano, B. Billah (Australia)	P-114
Liraglutide inhibits IAPP-induced IL-1 beta production from islets Z. Tiehong, J. Yujing, L. Daiqing, Z. Yunsheng (China)	P-115
Cardiac autonomic neuropathy in persons with type 2 diabetes mellitus <u>S. Bawankule</u> (India)	P-116
<b>"A byte a day, keeps complications away"</b> <u>M. Prabhath</u> , S. Umakanth, A. Maiya, S. Mayya, P. Saraswat, S. Hebbar, N. Shastry, V. Upadya (India)	P-117
Musculoskeletal disorders among fish processing workers with type 2 diabetes mellitus in coastal region of Udupi City <u>R. Navada</u> , S. G, A. Maiya, V. Guddattu (India)	P-118
Correlation of micro-vascular complications of type 2 diabetes with platelet indices R. Walinjkar, S. Bawankule, S. Khadse (India)	P-119
Patient- vs physician-managed algorithm for titrating insulin glargine 300 U/mL in type 2 diabetes: the ITAS study R. Bonadonna, A. Giaccari, R. Buzzetti, G. Aimaretti, D. Cucinotta, A. Avogaro, G. Perseghin, M. Larosa, G.B. Bolli, C. Fanelli (Italy)	P-120
Reduced ficolin-3-mediated lectin complement pathway activation among T2DM patients having urinary tract infections  L.J. Barkai, E. Sipter, D. Csuka, Z. Prohászka, N. Hosszúfalusi (Hungary)	P-121
Study of vitamin D status and its association with dyslipidemia in type 2 diabetes <u>S. Begum</u> , A. Selvakumar, P. Parthasarathy (India)	P-122
A case of Mauriac Syndrome - lest we forget A. Ray, S. Siddhanta, N. Sengupta, P. Sahana, A. Baidya, S. Goswami, R. Kumar, S. Rabindranath (India)	P-123

A comparative study of community acquired pneumonia in patients with diabetes nellitus and without diabetes mellitus <u>5. Kolli</u> (India)	P-124
Diabetes Self-Management Education Program in Indonesian Tertiary Hospital, 2014-2015  A. Kshanti, S. Sudarsono, N. Magfira (Indonesia)	P-125
Emergency Room's Nurses Knowledge on Insulin Pen Injection in Tertiary Hospital in Indonesia <u>5. Suryadi</u> , I.A. Kshanti, N. Magfira (Indonesia)	P-126
Factors Affecting Dietary Compliance in Patients with Diabetes <u>A. Herlina</u> , 2. , N. Cahajatie, I.A. Kshanti, N. Magfira (Indonesia)	P-127
Knowledge of type 2 diabetic patients about their condition in Kimpese Hospital diabetic clinic, DRC  P. Ntontolo Ngangu, P.N. Lukanu, G.A. Ogunbanjo, J.P.L. Fina, L.N.M. Kintaudi (Democratic Republic of Congo)	P-128
A nationwide registry to identify the Indian diabetic phenotype in diabetes mellitus participants: IP- Registry 5. <u>Kalra</u> (India)	P-129
Combining fluid shear stress and melatonin treatment for effective regulation of adipogenesis (.H. Lee, J. Lee, C.H. Kim (South Korea)	P-130
Browning of white adipocytes by osteopontin treatment in 3T3-L1 cells  Lee, Y.H. Lee, C.H. Kim (South Korea)	P-131
PERK-eIF2 pathway regulates expression and degradation of glucose transporters during diabetic proteotoxicity in liver <u>V.K. Pandey</u> , A. Mathur, M.F. Khan, P. Kakkar (India)	P-132
Sodium chloride and diabetic complications <u>O. Agrawal,</u> Y. Kulkarni (India)	P-133
Monocyte chemoattractant protein-1 and diabetic complications K. Adki, Y. Kulkarni (India)	P-134

Beneficial effects of catechin-a natural phenolic compound in cardiovascular autonomic	
neuropathy in diabetes	P-135
<u>S. Suryavanshi</u> , Y. Kulkarni, V. Addepalli (India)	
Role of tannins in the management of diabetic complications <u>A. Laddha,</u> Y. Kulkarni (India)	P-136
Prevalence of T2DM complications in 3140 patients initiating second-line therapy: the	
DISCOVER study India subset	P-137
A. Mithal, P. Shamanna (India)	







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