

therapy) were identified as significant and independent risk factors for hypoglycaemia.

Conclusions In older patients with type-2 diabetes, old age, longer duration of diabetes, renal insufficiency, improper blood glucose control and usage of short or intermediate-acting insulins were the risk factors for hypoglycaemia

[gw22-e0915]

THE ANALYSIS OF RISK FACTORS FOR HYPOGLYCAEMIA IN OLDER PATIENTS WITH TYPE-2 DIABETES

Sun Banruo, Li Yu-Peng, Xiao Jing, Cheng Xiao-Ling, Liu Yong-Quan, Tian Hui *Department of Endocrinology and Metabolism, Nanlou Clinical Division, Chinese PLA General Hospital, Beijing, China*

10.1136/heartjnl-2011-300867.310

Objective To study the characteristic features of risk factors for hypoglycaemia in older patients with type-2 diabetes.

Methods One hundred and ninety seven type-2 diabetes patients aged 60 and above with or without hypoglycaemia during the course of disease were registered from inpatient department from September 2008 to December 2009. Forty four subjects were identified as having hypoglycaemia and 153 subjects not having hypoglycaemia. The clinical data were compared and logistic regression analysis was performed to reveal the risk factors for total hypoglycaemia.

Results The old age (86.6 ± 5.1 vs 75.9 ± 9.3), longer duration of diabetes (21.6 ± 11.7 vs 13.0 ± 8.2), elevated serum creatinine (113.3 ± 55.6 vs 78.8 ± 18.9), lower endogenous creatinine clearance rate (46.4 ± 19.3 vs 76.1 ± 24.4) and high rates of insulin and sulphonylureas therapy were more common in patients with hypoglycaemia as compared with those without. The level of HbA1c were not significantly different between the two groups. With stepwise multivariate logistic regression analysis, age, endogenous creatinine clearance rate, HbA1c and usage of short or intermediate-acting insulins (including intensification