## CLINICAL FEATURES AND VASCULAR COMPLICATIONS OF DIABETES IN ASIANS

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907 consecutive patients (456 Asian and 451 white Caucasian) attending the diabetic clinic for at least one year, were assessed for the clinical features and complications of Diabetes in Asians. When compared to white Caucasians, Asians had a mean age of diagnosis at 46.5 years (versus 40.6 years) (p<0.01); mean duration of diabetes 6.3 years (versus 11.4 yrs) (p<0.01); positive family history of diabetes in a first degree relative in 29.5% (versus 16% (p<0.01); absence of ketonuria at presentation in 85.3% (versus 47.8%) (p<0.01); and current insulin requirement in 31.4% (versus 68.7%) (p<0.01). End points of heart vascular disease (HVD) were angina with or without an abnormal standard 121eadECG, or definite mvocardial infarction: for cerebrovascular disease (CVD). neuroplegia>24hrs or residual paralysis clinically in the territory of a main cerebral artery; for peripheral vascular disease (PVD), (intermittent claudication or gangrene or amputation of a lower limb; for eye disease (ED), definite background, exudative or proliferative retinopathy on fundal examination under full pupillary dilatation; for kidney disease (KD), persistent 24hr urinary protein>0.5Gm with a normal 1VP and absence of infection. Overall prevalence for Asians and white Caucasians respectively was 25% and 22.4% for HVD; 2.2% and 3.5% for CVD; 3.7% and 9.3% for PVD; 11.6% and 32.3% for ED; 22.3% and 12.6% for KD. After adjusting for age, sex, duration of diabetes, age at diagnosis, hypertension and smoking, the relative risk (95% confidence intervals) for complications in Asians was HVD 1.15 (0.84-1 57); CVD 0.61 (027 1.37); PVD 0.51 (0.27-0.96); ED 031 (0.19-0.51). KD 336 (1.88-5.99). Multivariate logistic regression failed to reveal a significant contribution due to any of the above variables, BMI, HbA or physical activity in the development of complications. We conclude that Asian diabetics have a higher risk for kidney disease, but a lower risk for eye disease and peripheral vascular disease compared to white Caucasians.