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论文

二甲双胍对老年2型糖尿病患者肝肾功能的影响

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摘要:

目的 观察二甲双胍对老年2型糖尿病患者肝肾功能的影响。方法 选取96例口服降糖药或注射胰岛素血糖控制不佳 老年2型糖尿病患者,随机分二甲双胍组和对照组,检测空腹血糖(FBG)、糖化血红蛋白(HbA1c)、血脂、肝肾功及尿酸(UA),观察药物的副作用。结果 随访1年后,94例完成观察。二甲双胍组血肌酐(Cr)、UA及肾小球率过滤(GFR)治疗前后差异无统计学意义(P>0.05),血尿素氮(BUN)较治疗前明显升高(P<0.05),丙氨酸转氨酶(ALT)明显下降(P<0.05),无酸中毒发生,在不同的GFR水平下,二甲双胍组治疗前后GFR无显著变化;治疗1年后二甲双胍组BUN高于对照组(P<0.05),两组肝功、CR、GFR及UA差异无统计学意义(P>0.05)。结论 在老年2型糖尿病患者中,若无严重肝肾功损害,二甲双胍可安全有效降低血糖,对肝肾功能无明显影响。由于随访时间只有1年,长期应用能否引起肾功能的下降尚需继续随诊观察。

关键词: 二甲双胍; 老年; 2型糖尿病; 肾功能

Effect of metformin on hepatic and renal function in elderly patients with type 2 diabetes mellitus

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Abstract:

Objective Evaluating the safety of metformin in the treatment of elderly patients with Type 2 diabetes mellitus (T2DM). Methods 96 cases of elderly T2DM with poorly controlled blood glucose poorly controlled were randomly divided into the metformin group and the control group. The fasting blood glucose(FBG), glycosylated hemoglobin(HbA1c), lipid, hepatic and renal function and serum uric acid (UA) were determined before and after treatment, and the side effect of metformin was also observed. Result After one year, 94 cases accomplished the observation. After treatment with metfoumin the serum creatinine, uric acid and glomerular filtration rate(GFR) had no significant changes after treatment with metformin (P>0.05); the blood urea nitrogen(BUN) significantly increased (P<0.05); the alanine aminotransferase (ALT) significantly declined (P<0.05). The GFR at different levels had no significant changes and no acidosis occurred in all patients. Level of BUN in the metformin group was higher than that in the controls after treatment (P<0.05). Levels of hepatic function, Cr, GFR and UA had no significant difference between the two groups after treatment(P>0.05). Conclusion If the patients have no severe hepatic and renal dysfunction, metformin is safe and effective in the treatment of elderly patients with T2DM. Metformin does not promote the reduction of hepatic and renal function. Aging is not the contraindication of metformin, but observation is needed to last for much more time.

Keywords: Metformin; Elderly; Type 2 diabetes mellitus; Renal function

收稿日期 2009-12-29 修回日期 网络版发布日期

DOI:

基金项目:

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