Systemic inflammation and diabetes mellitus

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Diabetes mellitus is a rapidly growing, leading public health problem with increasing incidence and long term complications. Diabetes Mellitus is rapidly increasing in both developing and developed countries especially in the urban areas. Diabetes is one of the world’s most important causes of disability, morbidity and mortality. There are multiple causes of diabetes mellitus including genetics, population growth, aging, physical inactivity, sedentary lifestyle, obesity, urbanization, environmental pollution and systemic inflammation. Insulin resistance and β-cell failure continue to be recognized as the central causal processes in the development of type 2 diabetes, other paradigms have been also evolved, influenced by findings indicating an inflammatory basis. There is an association between inflammation markers and incident of diabetes. A low-grade inflammation precedes and predicts diabetes development in adults. Several reports investigating various markers of inflammation in different population groups have confirmed this association. The marked variation in magnitude of these reported associations and the frequently modest correlations found between markers of inflammation highlight the difficulty of characterizing this low-grade systemic inflammatory state as a leading cause of diabetes. Increased levels of IL-6, CRP, orosomucoid, and sialic acid are related to the development of diabetes in middle-aged adults.

Biography

Saeed Vohra is a medical graduate [MBBS] with higher postgraduate degrees [M.Phil] and Doctorate [Ph.D.] in Cell Biology. Presently working as Assistant Professor of Anatomy in College of Medicine King Saud University Riyadh Saudi Arabia. He has long experience of teaching/research. He is author of many scientific papers in peer reviewed national / International Journals.

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