OMICS International
conferenceseries.com

J Diabetes Metab 2015, 6:10
http://dx.doi.org/10.4172/2155-6156.C1.034

6th Global Diabetes
Summit and Medicare Expo

November 02-04, 2015 Dubai, UAE

A clinical review of GLP-1 receptor agonsits: Efficacy and safety in diabetes and beyond

Diana Isaacs
Chicago State University College of Pharmacy, USA

The prevalence of type 2 diabetes is increasing at an astounding rate. Many of the agents used to treat type 2 diabetes have undesirable adverse effects of hypoglycemia and weight gain. Glucagon-like peptide-1 (GLP-1) receptor agonists represent a unique approach to the treatment of diabetes, with benefits extending outside glucose control, including positive effects on weight, blood pressure, cholesterol levels, and beta-cell function. They mimic the effects of the incretin hormone GLP-1, which is released from the intestine in response to food intake. Their effects include increasing insulin secretion, decreasing glucagon release, increasing satiety, and slowing gastric emptying. There are currently four approved GLP-1 receptor agonists in the United States: exenatide, liraglutide, albiglutide, and dulaglutide. A fifth agent, lixisenatide, is available in Europe. There are important pharmacodynamic, pharmacokinetic, and clinical differences of each agent. The most common adverse effects seen with GLP-1 therapy include nausea, vomiting, and injection-site reactions. Other warnings and precautions include pancreatitis and thyroid cell carcinomas. GLP-1 receptor agonists are an innovative and effective option to improve blood glucose control, with other potential benefits of preserving beta-cell function, weight loss, and increasing insulin sensitivity. Once-weekly formulations may also improve patient adherence. Overall, these are effective agents for patients with type 2 diabetes, who are either uncontrolled on metformin or intolerant to metformin.

dianamisaacs@gmail.com

Average number of syncytial knots in diabetic, hypertensive and normal placenta

Farrah Shams
Batterjee Medical College, Saudi Arabi

Presence of Syncytial knots is one of the placental abnormalities, found in early pregnancy , can lead to an increased number in mature placenta and alter its function. A massive increase in the intensity of fetal monitoring and changes in the method of delivery including use of caesarean sections have not decreased the incidence of poor fetal outcome, leading to high risk in obstetrics.

Cross sectional comparative study was carried at the dept. of Anatomy, Institute of Basic Medical Sciences (IBMS) and Dow Diagnostic Research and Reference Lab, Dow University of health sciences (DDRRL/DUHS), and cases were examined and identified for diabetes and hypertension during pregnancy.

It was observed that the average Syncytial knots of 24.7 percent patients out of 150 were lying in the range 16-20 and 17.3 percent patient's average Syncytial knots was less or equal to 5, It was also noticed that majority of the patients who had average less than or equal to 5 belonged to the control group (i.e. 48%) and those who had average Syncytial knots 16-20 belonged to the hypertensive group (i.e. 44%) whereas, in diabetic group 38% patients had average Syncytial knots ranging from 11-15.

In our study association was found in increased number of Syncytial knots and disease groups. A relative frequency of hypoxic changes and acute atherosis in the third trimester placentas from pregnancies complicated by the eclampsia /Preeclampsia was expected. Still in our part of the world reinforcement is.

drfarrahshams@hotmail.com

Notes: