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Safety of dapagliflozin on 12-derived electrocardiogram in patients with type 2 diabetes mellitus

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Statement of the Problem: Since cardiovascular complications of Diabetes Mellitus (DM) are life-threatening, treatment of DM must be more attentive. Dapagliflozin is a Sodium Glucose Co-Transporter-2 Inhibitor (SGLT-2) and there was a doubt whether a potential electrolyte imbalance and its electrocardiographic side effects. We aim to determine the safety of dapagliflozin on 12-derived electrocardiogram in patients with type 2 DM.

Methodology & Theoretical Orientation: 41 patients (28 male, 13 female; mean age 50.3 ± 16) with type 2 DM who used Sodium Glucose Co-Transporter-2 Inhibitor (SGLT-2), dapagliflozin, were enrolled into the study. Patients' data such as laboratory materials, electrocardiographic findings and drugs, were compared between the initiation of dapagliflozin treatment and in the first control (mean time 2.2 months after the initiation).

Findings: Patients drugs were similar at the initiation of treatment and surveillance. Glucose, triglycerides, low-density lipoprotein, eGFR, and hemoglobin A1c levels were significantly lower after the treatment ($p < 0.05$), Mean serum creatinine was significantly higher at control visit ($p < 0.05$). Serum electrolytes were similar between the initiation of dapagliflozin treatment and after therapy. No statistically significant difference was found in terms of those electrocardiographic findings: Mean QRS duration, QT, corrected QT, Tpe interval and Tpe/QT ratio ($p > 0.05$). Only heart rate was found to be significantly lower after the therapy (79.9/min vs 76.2/min, respectively) ($p = 0.02$).

Biography

Gamze Akkus has her expertise in adult endocrinology and metabolism preceded by internal medicine at Cukurova University Medical Faculty. She works in Antakya State Hospital. Her areas of interest are acromegaly, diabetes mellitus, adrenal pathologies and pubertal disorders.

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