



徐芬娟, 沈飞霞, 张青森, 宣少平, 朱娟飞. 门冬胰岛素30联合二甲双胍或阿卡波糖对2型糖尿病患者血糖变异的影响及达标状况的比较
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Comparison of Insulin Aspart 30 Combined with Metformin or Acarbose on Glycemic Variability and Compliance Status in Patients with Type 2 Diabetes

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中文摘要:

目的 观察门冬胰岛素30单用或联合二甲双胍、阿卡波糖对2型糖尿病患者血糖变异的影响及达标状况。方法 患者随机分为3组分别接受门冬胰岛素30、门冬胰岛素30+二甲双胍(简称二甲双胍组)、门冬胰岛素30+阿卡波糖(简称阿卡波糖组)治疗, 保持三餐前血糖平衡, 观察血糖波动指标、达标时间、低血糖事件、胰岛素量及费用。结果 门冬胰岛素30组在晚餐后及2:00血糖高于二甲双胍组及阿卡波糖组; 其余时间点血糖差异无统计学意义。治疗后8个时间点血糖标准差、最大血糖波动幅度二甲双胍组及阿卡波糖组<门冬胰岛素30组。餐后血糖波动幅度则阿卡波糖组<门冬胰岛素30组。从治疗开始到达标时间门冬胰岛素30组较二甲双胍组和阿卡波糖组低血糖发生率3组无显著性差异, 每日2次胰岛素比例二甲双胍组>阿卡波糖组>门冬胰岛素30组, 达标后胰岛素日剂量门冬胰岛素30<阿卡波糖组>二甲双胍组($P<0.05$), 日费用阿卡波糖组>二甲双胍组和门冬胰岛素30组。结论 单用门冬胰岛素30治疗血糖波动幅度大, 从治疗到达标所需要的时间相对较长; 联合二甲双胍或阿卡波糖可以降低血糖波动幅度, 减少胰岛素注射次数; 联合二甲双胍减少胰岛素日剂量。

英文摘要:

OBJECTIVE To investigate the effect of Insulin aspart 30 alone or combined with metformin or acarbose on the glucose variability and the reach of standard conditions in patients with type 2 diabetes. METHODS The patients diagnosed type 2 diabetes were randomly divided into three groups: the Insulin aspart 30 group, the metformin group and the acarbose group, which received the treatment of Insulin aspart 30, Insulin Aspart 30+metformin and Insulin Aspart 30+acarbose respectively. The blood glucose homeostasis were maintained before meals and at bedtime, and then the blood glucose fluctuation index, the standard time, the hypoglycemic events, the insulin dosage, as well as the expenses observed. RESULTS The comparison of the blood glucose at each time point after treatment: the blood glucose after dinner, the blood glucose at 2:00 were higher in the Insulin Aspart 30 group than those in the metformin group and acarbose group, while there was no statistically significant difference in blood glucose at other time points. The fluctuation of the blood glucose: the standard deviation (SD) of the 8 points blood glucose after treatment, the largest blood glucose fluctuation(LAGE) were smaller in the metformin group and the acarbose group than that in the Insulin Aspart 30 group. As to the postprandial blood glucose fluctuation(PPGE), the acarbose group was less than Insulin Aspart 30 group. The standard time, safety, convenience and economic index: the time from the beginning of treatment to the standard time was longer in the Insulin Aspart 30 group than that in the metformin group and the acarbose group; As to the incidence of hypoglycemia, there was no significant difference among the three groups; when it comes to the ratio of twice a day insulin usage, the metformin group accounts for the largest proportion, while

Insulin Aspart 30 group accounts for the least; As to the daily insulin dosage after reaching the standard, the Insulin Aspart 30 group, the acarbose group were higher than the metformin group ($P < 0.05$); Compared with the metformin group, the Insulin Aspart 30 group, the acarbose group cost the most. CONCLUSION Single use of Insulin Aspart 30 results in a greater blood glucose fluctuation, a longer time from the beginning of treatment to the standard time. Insulin Aspart 30 combined with metformin or acarbose can reduce the blood glucose fluctuations as well as the insulin injection