IDF
Diabetes Complications Congress 2018
Hyderabad, India - 25-27 October

PROGRAMME BOOK

www.idf.org/hyderabad2018
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IDF

Diabetes Complications Congress 2018

Hyderabad, India - 25-27 October

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Disclaimer: The content of this publication reflects the situation at the time of printing and may be subject to change. The organiser cannot be held liable for any inconvenience resulting from these changes.
It is with great pleasure that we welcome you to the IDF Diabetes Complications Congress 2018, the first in a new series of live educational events developed by the International Diabetes Federation to tackle the issues around diabetes complications.

Diabetes currently affects 425 million adults, a total that is set to reach 629 million by 2045. When not appropriately managed, all types of diabetes can result in complications affecting many parts of the body, leading to frequent hospitalisation and early death.

Diabetes is one of the leading causes of cardiovascular disease, with one out of four diabetes inpatient costs a consequence of cardiovascular complications. Diabetic retinopathy is the leading cause of vision loss in working-age adults. The prevalence of end-stage renal disease is up to ten times higher in people with diabetes. Pregnant women with diabetes are at increased risk of maternal and foetal complications. Losing a limb is one of the most feared complications of diabetes and a major medical problem worldwide.

India, home to the second largest number of diabetes cases (73 million in 2017), is the ideal setting for IDF 2018. With over half of people currently living with diabetes in the country estimated to be undiagnosed, there is urgency to increase awareness and knowledge of diabetes and its associated complications among healthcare professionals to promote screening and early diagnosis to improve health outcomes and help save lives.

The IDF Congress 2018 features over 100 invited speakers from around the world and a dynamic programme, spread over nine streams, that provides the latest research, treatments and tools to limit and treat diabetes complications. The congress has been accredited with 15 European CME credits.

We look forward to an inspirational educational event that will help shape a better future for people affected by diabetes.

Professor Nam H. Cho  
President, IDF

Dr Shaukat Sadikot  
Chair, Organising Committee

Dr Ammar Ibrahim  
Chair, Programme Committee

Dr Banshi Saboo  
Chair, National Advisory Committee
The International Diabetes Federation is an umbrella organisation of over 240 national diabetes associations in 170 countries and territories. It represents the interests of the growing number of people with diabetes and those at risk. The federation has been leading the global diabetes community since 1950. IDF’s mission is to promote diabetes care, prevention and a cure worldwide. For more information please visit www.idf.org
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LEARNING OBJECTIVES

Diabetes Complications

Stream Description
This stream deals with general aspects of common and rarer diabetic complications, the latest research into these complications and up-to-date prevention politics and treatments.

Learning Objectives
After attending a session in the Diabetes Complications stream the participant will be able to:
• Understand the epidemiology, pathophysiology, diagnosis, prevention and treatment of the complication developed in the session
• Decide how to individualise the diagnostic, prevention and treatment tools in the setting where they operates as healthcare practitioner
• Define the appropriate moment to refer the patient to a level of greater complexity

Diabetic Foot

Stream Description
This stream deals with general aspects of the diabetic foot as well as the epidemiology and public health challenges presented by the condition. It also focuses on education and care needed for management and prevention of diabetic foot.

Learning Objectives
After attending a session in the Diabetic Foot stream the participant will be able to:
• Identify the importance of prevention of diabetic foot and to be able to detect the risk factors for it
• Understand the latest innovations in diabetic foot treatment
• Better understand the impact of diabetic foot problems on patients, their families and on the healthcare system
• Use available resources to improve the outcome of patients with diabetic foot
• Correctly plan the establishment of diabetic foot centres

Foot - Peripheral Arterial Disease

Stream Description
Peripheral Arterial Disease (PAD) is frequent in people with diabetes being one of the strongest predictors of non-healing foot ulcers and amputations and an independent factor for increased mortality due to associated cardiovascular and cerebrovascular diseases. PAD in diabetes is largely asymptomatic until an advanced stage. It is usually present at an earlier age and progresses more rapidly and extensively than in patients without diabetes. There is strong evidence to show that early detection of PAD with interventions targeted on risk factor modification and revascularisation will reduce the rates of disease progression and amputations. In real life, many patients still have no vascular assessment even when having a foot ulcer or before amputation. The prevention and management of neuroischaemic ulcers is overlooked and underused in high-risk patients. To change this paradigm, healthcare services for people with PAD should include multidisciplinary trained teams with clear definitions of tools and objectives to be attained including the use of specific educational programmes.

Learning Objectives
After attending sessions in the Foot - Peripheral Arterial Disease stream, participants will be able to:
• Know and discuss epidemiology of foot ulceration and diabetic peripheral arterial disease
• Know the pathophysiology of arterial disease in diabetic foot (mechanisms, specificities, and risk factors)
• Know how to screen patients with diabetic foot for PAD and be able to make clinical diagnoses
• Know the treatment of PAD- lifestyle and risk factor modifications, drug therapy and vascular interventions
• Make the correct decision and timely referral to a specialist
• Understand and recognise the importance of new technics and technology in diagnosis and treatments for PAD
• Discuss different health care organisation models for the best care in PAD
Foot - Ulcers and Infection

Stream Description
The scientific sessions on foot ulcer and infections will teach current concepts on how to recognise, evaluate and manage patients with diabetes related foot and ankle conditions, complicated by peripheral neuropathy, vascular diseases, foot ulcers and infection. Medical and surgical treatments as well as an overall review of diabetes will enhance the attendees’ knowledge to improve care in their practice.

Learning Objectives
After attending sessions in the Foot - Ulcers and Infection stream, participants will be able to:
- Learn and review the basic science of wound healing, the advances in technologies apply to the process of healing, and some of their challenges.
- Learn about how the foot function affects the risk of developing a foot ulcer, and how to offload the foot to heal difficult wounds.
- Learn advances in the treatment of diabetic foot soft tissue infections and osteomyelitis, specifically controversies in diagnosis, medical, and surgical management.
- Learn about evidence-based assessment and medical treatment of vascular diseases related to diabetes and to the foot and ankle. The audience will also learn to recognise podiatric issues related to vascular problems to better manage the patients in a timely manner.

Foot - Peripheral Diabetic Neuropathy and Charcot

Stream Description
The diabetes pandemic is forcing a necessary and much needed mandatory preventative approach to diabetic neuropathy on a global level. We are urging all healthcare practitioners to fully understand the pathway of destruction of the diabetic foot and alternatively the much more favoured pathway to prevention in managing the diabetic foot. Only with full understanding of neuropathy and its role in the formation of ulcers, amputations and the Charcot foot are we able to prevent foot complications. An urgency to intervene in the “Window of Presentation” (risk category 1 and 2 before progression to 3) will be reviewed with participants. Research on the treatments for painful and painless neuropathy will be reviewed. The focus of will be on real life treatment protocols, as well as management in developing countries, as the burden of diabetes are in these countries. Through education and fully understanding the IDF Diabetic Foot Guidelines we can decrease the morbidity of foot complications globally and keep diabetic patients active, walking and mobile.

Learning Objectives
After attending sessions in the Foot - Peripheral Diabetic Neuropathy and Charcot stream, participants will be able to:
- Fully understand the IDF Diabetic Foot Guidelines
- Fully understand current screening techniques and diagnosis for diabetic neuropathy
- Fully understand early intervention in assessing, risk categorising and treating neuropathy
- Recognise the urgency to intervene in the “Window of Presentation”
- Understand how intervention and protection of the neuropathic foot in developing countries is done; this is the burden of the newly diagnosed cases
- Understand current medical and non-medical treatment of painless and painful diabetic neuropathy
- Fully understand how to intervene to prevent the destruction of the neuropathic foot from progressing into the Charcot foot
- Be able to manage the Charcot foot
- When to refer to the multidisciplinary foot clinic
Cardiovascular Risk Factors

Stream Description
Diabetes mellitus is a major health problem globally as a consequence of the aging of the population, unhealthy lifestyle and the resultant epidemic of obesity. Cardiovascular disease is the leading cause of morbidity and mortality in people with diabetes and is the largest contributor to health care costs for diabetes. A number of cardiovascular risk factors co-exist in people with diabetes including hypertension, hyperlipidaemia, insulin resistance and obesity. There is good evidence that management of risk factors such as blood pressure, dyslipidaemia and glucose can lead to improved microvascular and macrovascular complications in individuals with type 2 diabetes mellitus and also legacy benefits of multifactorial risk factor control. In addition, lifestyle factors such as nutrition and physical activity also influence cardiometabolic risk factors. International guidelines therefore consider people with diabetes and cardiovascular risk factors and microvascular disease as having high cardiovascular risk and recommend regular assessment and management of cardiovascular risk factors in these populations.

Learning Objectives
After attending sessions in the Cardiovascular Risk Factors stream, participants will be able to:
• Understand the epidemiology of risk factors associated with cardiovascular outcomes in people with diabetes
• Understand the evidence for multifactorial risk factor management in people with diabetes
• Discuss the evidence base for lifestyle interventions in people with diabetes
• Understand individualisation of risk factors targets for people with diabetes
• Will be able to manage risk factor using evidence based therapies in people with diabetes
• Recognise the importance of novel risk factors such as hypoglycaemia and albuminuria for cardiovascular complications in people with diabetes
• Understand the epidemiology of gestational diabetes and vascular aging in relation to cardiovascular complications
• Discuss different health care organisation models for the best care in PAD

Coronary Heart Disease and Heart Failure

Stream Description
Cardiovascular disease has emerged as a central target in patients with diabetes. This has now extended to all vascular areas within the insulin resistant patient. Translational information on the disease process starts in some cases with parents and then extends to their offspring. Individuals with insulin resistance or diabetes in combination with one or more of these risk factors (obesity, HT, lipids, poor lifestyle) are at even greater risk of heart disease or stroke. However, by managing their risk factors, patients with diabetes may avoid or delay the development of heart and blood vessel disease. In this section, we will focus on clinical cardiovascular disease in relation to insulin resistance in high-risk patients.

Learning Objectives
After attending sessions in the Coronary Heart Disease and Heart Failure stream, participants will be able to:
• Understand of the translational science that relates to guidelines in clinical practice for diabetes patients
• Understand global impact of insulin resistance in the development of cardiovascular disease
• Know of the impact of diabetes on the myocardium
• Know of the mechanism involved in the development of vascular disease
• Have new insights into the treatment of normal and reduced ejection fractions in patients with diabetes
• Have new insights into the beneficial effects on the CV system with new cardio-renal agents that reduce glucose
• Review the current standards of care in the treatment of global risk factors
• Understand the future consideration in vascular and renal protection in diabetes patients
**Diabetes and Kidney Disease**

**Stream Description**
The scientific sessions in the Diabetes and Kidney Disease stream will offer researchers and healthcare professionals the unique opportunity to review recent advances in diabetic kidney disease, hot topics and controversies with emphasis on sharing ideas and knowledge.

**Learning Objectives**
After attending sessions in the Diabetes and Kidney Disease stream, participants will be able to:
- Understand the epidemiology, pathophysiology, genetic, diagnosis, prevention and treatment of the kidney complications developed in the session
- Decide how to individualise the diagnostic, prevention and treatment tools in the setting where they operate as healthcare practitioner
- Define the appropriate moment to refer the patient to a level of greater complexity
- Identify recent advances in the diagnosis and management

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**Diabetic Eye Disease**

**Stream Description**
The increasing global prevalence of diabetes has led to a corresponding epidemic of diabetic eye disease. Screening and timely intervention in the presence of sight threatening diabetic eye disease can prevent visual loss however diabetic retinopathy remains the leading cause of visual loss in many countries. A holistic approach is mandatory as diabetic eye disease is an end organ response to a systemic disease – diabetes. Awareness, metabolic control and control of other risk factors are the mainstay in this respect. Besides further research on the pathophysiology, and primary and secondary prevention of diabetic eye disease, we need to focus on translating the evidence available to prevent visual loss, into public health action which will impact the lives of people with diabetes. This will be facilitated by the development and proper implementation of new/existing nation-wide/region-wide/global initiatives. Only in this way can we decrease the global morbidity cause by diabetic eye disease.

**Learning Objectives**
After attending sessions in the Diabetic Eye Disease stream, participants will be able to:
- Review current diagnosis of diabetic eye disease and current screening recommendations and future developments
- Review current treatment strategies for diabetic eye disease and future developments
- Recognise the importance of holistic approach to the diabetic eye disease
- Recognise the importance of translation of evidence base into the real life to reduce the burden of diabetic eye disease
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**Programme Overview - Friday 26 October**
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<td><strong>Targets for glycaemia, dyslipidaemia and hypertension: How low should we go? &amp; Prevalence and screening for complications in youths with diabetes</strong></td>
<td><strong>Is universal salt restriction useful in preventing cardiovascular complications?</strong></td>
<td><strong>Surgical approach to diabetic foot ulcers</strong></td>
<td><strong>The clinical approach to managing a person with early nephropathy</strong></td>
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<td><strong>Posters</strong></td>
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<td>14:30</td>
<td><strong>Symposium:</strong></td>
<td><strong>Symposium:</strong></td>
<td><strong>Oral Presentations:</strong></td>
<td><strong>Oral Presentations:</strong></td>
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<tr>
<td></td>
<td><strong>Treatment of complications</strong></td>
<td><strong>Newer updates</strong></td>
<td><strong>Diabetic Foot</strong></td>
<td><strong>Kidney, eye, cardiovascular complications</strong></td>
<td><strong>Diabetes complications</strong></td>
</tr>
<tr>
<td>16:15</td>
<td><strong>Tea/Coffee Break</strong></td>
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<td>16:30</td>
<td><strong>Closing Ceremony</strong></td>
<td><strong>Closing Ceremony Hall 4</strong></td>
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</tbody>
</table>

**Programme Overview - Saturday 27 October**

**Symbols**
- Diabetes Complications
- Diabetic Foot
- Cardiovascular Disease
- Diabetic Eye Disease
- Diabetes and Kidney Disease
- Oral Presentations
Badges

Participants are requested to wear their badge at all times while in the congress centre. Kindly note that an administrative fee of € 20 /INR 1600 will be charged should a new badge be issued.

<table>
<thead>
<tr>
<th>Colour code for badges</th>
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<tbody>
<tr>
<td>Delegate</td>
<td>Blue</td>
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<tr>
<td>Exhibitor</td>
<td>Red</td>
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<tr>
<td>Invited speaker</td>
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<tr>
<td>Media</td>
<td>Orange</td>
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<tr>
<td>Staff</td>
<td>Yellow</td>
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</tbody>
</table>

Cash dispenser

An ATM machine is located at the Novotel Hotel adjacent to the Hyderabad Convention Center.

Catering

Congress lunch is included in the registration fee and served between 13.00 and 14.00 on Thursday 25 October and between 12.30 and 14.30 on Friday 26 and Saturday 27 October.

The IDF Blue Circle for diabetes

The Blue Circle is the universal symbol for diabetes. The purpose of the diabetes symbol is to give diabetes a common identity.

The icon was originally developed in 2006 for the campaign for a United Nations Resolution on diabetes. The campaign was a response to the diabetes pandemic.

The blue circle aims to:
• support all existing efforts to raise awareness about diabetes
• inspire new activities, bring diabetes to the attention of the general public
• brand diabetes
• provide a means to show support for the fight against diabetes

Please wear the pin throughout the congress and unite with us for diabetes.
Continuing Medical Education (CME)

The IDF Congress is an accredited live learning event.

European accreditation

The IDF Diabetes Complications Congress 2018 has been accredited by the European Accreditation Council for Continuing Medical Education (EACCME) for a maximum of 15 European CME credits (ECMEC’s).
EACCME is an institution of the European Union of Medical Specialists (UEMS), www.eaccme.eu. Each medical specialist should claim only those hours that he/she spent in a medical activity. EACCME credits are recognised by the American Medical Association (AMA) towards the Physician’s Recognition Award (PRA). To convert EACCME credits to AMA PRA category 1 credit, contact the AMA.

Indian accreditation

Indian CME accreditation has been applied for from the Telengana Medical Council.

Currency

The Euro (EUR) is the official currency of the congress. Some local services may be priced in Indian Rupees. The current exchange rate can be checked under http://www.xe.com/currencyconverter.

Language

The official language of the congress is English. All sessions will be in English only.

Liability and insurance

Neither the International Diabetes Federation (IDF), nor MCI (the appointed local partner) or any other supplier active in the congress centre will assume responsibility for injury and/or damage involving persons or property during the congress. Participants are advised to take out a personal insurance for the congress.

Lost and Found

Any lost & found item will be taken care by HICC security team +91 9642326246. Valuable item would be stored for 1 year and non valuable would be stored for 3 months.

Medicine and first aid

In case of emergency please contact HICC Security at +919642326246.

IDF Diabetes Complications Congress 2018

Opening hours

<table>
<thead>
<tr>
<th>Activity</th>
<th>Day</th>
<th>Hours</th>
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<tbody>
<tr>
<td>Individual registrations</td>
<td>Thursday 25 October- Saturday 27 October</td>
<td>08.00 - 17.00</td>
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<tr>
<td>Posters</td>
<td>Friday 26 October</td>
<td>12.30 - 14.30</td>
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<tr>
<td>Programme sessions</td>
<td>Thursday 25 October</td>
<td>14.00 - 19.00</td>
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<td></td>
<td>Friday 26 October</td>
<td>09.00 - 19.00</td>
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<tr>
<td></td>
<td>Saturday 27 October</td>
<td>09.00 - 17.00</td>
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</tbody>
</table>
**Session recording policy**

No sessions may be recorded or broadcast in any format by any attendee. Use of digital cameras to record individual slides is not allowed. The use of photographs of slides in any subsequent publication or presentation or any other distribution is a breach of copyright and may result in prosecution by the owner of the data or ideas. The use of flash is also forbidden.

**Speaker preview room**

The speaker preview room is located in the Organiser’s office 1 on the ground floor of HICC. All speakers need to report to the speaker preview room at least 3 hours prior to the start of their session, for their presentations to be uploaded to the appropriate session hall. Speakers with early morning presentations should be at the speaker preview room the day before. No laptop presentations will be allowed in the session halls for the scientific programme.

**Time zone**

Hyderabad is India Standard time, GMT+5:30 during the congress.

**Wheelchair**

Please contact HICC Security at +919642326246 if you require wheelchair services.

<table>
<thead>
<tr>
<th>Scheduled opening hours</th>
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<tbody>
<tr>
<td>Thursday 25 October</td>
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<tr>
<td>11.00 - 19.00</td>
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<td>Friday 26 October</td>
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<tr>
<td>07.00 - 19.00</td>
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<tr>
<td>Saturday 27 October</td>
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<tr>
<td>07.00 - 17.00</td>
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</tbody>
</table>
Neuropathy

Chair: B. Saboo (India)
Chair: J. Ahmad (India)

14:00  Diabetic neuropathy: An overview
Speaker: R. Malik (Qatar)

14:20  Can we prevent diabetic neuropathy
Speaker: M. Djordjevic (Serbia)

14:40  Motor neuropathy: A neglected complication of diabetes
Speaker: A.K. Das (India)

15:00  Discussion
15:15 - 15:45 Hall 4

Is ankle-brachial index a predictor for peripheral vascular disease in diabetes?

Chair: S. Reddy (India)
Chair: R. Kovil (India)

15:15 Yes
Speaker: B. Sosale (India)

15:25 No
Speaker: N. Deshpande (India)

15:35 Discussion
Diabetes and peripheral arterial disease

Chair: R. Saxena (India)
Chair: G.D. Ramchandani (India)

16:00 Epidemiology of atherosclerotic peripheral arterial disease: A review and recent developments 006
Speaker: A.L. Costa (Portugal)

16:20 Potential risk factors and types of vascular calcification in peripheral arterial disease 007
Speaker: R. Sahay (India)

16:40 Recent advances and newer technologies in the management of peripheral arterial disease 008
Speaker: E. Jude (United Kingdom)

17:00 Discussion
Plenary Lectures

Chair:  L. Ji (China)
Chair:  L.M. Gardete Correia (Portugal)

17:15  IDF clinical practice recommendations on the diabetic foot  009
Speaker:  A. Ibrahim (Dominican Republic)

17:45  Inflammation: The yin and yang of diabetes complications  010
Speaker:  S. Sadikot (India)

18:15  Discussion
18:30 - 19:00  Hall 4

**Presidential Oration**

*Chair:*  S. Sadikot (India)
*Chair:*  A. Ibrahim (Dominican Republic)

18:30  
**Check your eyes, see into the future**
*Speaker:*  N. Cho (South Korea)
14:00 - 15:15 Hall 5

Peripheral arterial disease management

Chair: A. Ibrahim (Dominican Republic)
Chair: R. Kovil (India)

14:00<br>Managing peripheral arterial disease in primary care 012<br>Speaker: Z. Xu (China)

14:20<br>Critical limb ischaemia: The need for a new model of integrated care 013<br>Speaker: P. Ramakrishna (India)

14:40<br>Improving care in different settings 014<br>Speaker: E. Jude (United Kingdom)

15:00<br>Discussion
15:15 - 15:45  Hall 5

Is diabetes the first heart attack?

Chair:  S. Rao (India)
Chair:  S.K. Kota (India)

15:15  Yes  015
Speaker:  R.P. Sibarani (Indonesia)

15:25  No  016
Speaker:  S.C. Agarwal (India)

15:35  Discussion
### Diabetes and infections

**Chair:**  S.R. Aravind (India)  
**Chair:**  K. Sai (India)

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
<th>Speaker</th>
<th>Code</th>
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<tbody>
<tr>
<td>16:00</td>
<td>Diabetes and tuberculosis: A dual burden in 3rd world countries</td>
<td>S.R. Joshi (India)</td>
<td>017</td>
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<tr>
<td>16:20</td>
<td>Unusual infections in diabetes</td>
<td>P. Chawla (India)</td>
<td>018</td>
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<tr>
<td>16:40</td>
<td>Global recommendations of immunisation in patients with diabetes</td>
<td>To be confirmed</td>
<td>019</td>
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<tr>
<td>17:00</td>
<td>Discussion</td>
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</tbody>
</table>
**Infections in diabetes**

*Chair: K. Sai (India)*  
*Chair: T.K.M. Easwar (India)*

14:00 **Genital infections - a clue to glycaemic control**  
*Speaker: R. Chawla (India)*

14:20 **Recurrent urinary tract infections, mainly in post menopausal females: How to manage**  
*Speaker: A. Kaul (India)*

14:40 **Sterile pyuria in diabetes - what physicians should know**  
*Speaker: J. Panda (India)*

15:00 **Discussion**
Can renin-angiotensin-aldosterone system blockade prevent or delay the progression of diabetic nephropathy?

Chair: L.M. Gardete Correia (Portugal)

15:15  Yes
Speaker: M. Sahay (India)

15:25  No
Speaker: T. Kamat (India)

15:35  Discussion
THURSDAY 25 OCTOBER 2018

16:00 - 17:15 Hall 6

**Diabetes and the eye**

*Chair: G. Tan (Singapore)*
*Chair: A. Patel (India)*

16:00
**Current recommendations for diabetic retinopathy screening: When and how**
*Speaker: To be confirmed*

16:20
**Lesion-aware deep learning system for diabetic retinopathy screening**
*Speaker: W. Jia (China)*

16:40
**A large community survey on diabetic retinopathy screening**
*Speaker: C. Chun (China)*

17:00
**Discussion**
14:00 - 15:15 Meeting Room 1-3

**Wound care**

*Chair:*  M. Ruke (India)  
*Chair:*  S. Phatak  

14:00  
**Comparing the classifications of diabetes foot wounds**  
*Speaker:*  M. Singh (India)  

14:20  
**How to manage infected foot ulcers**  
*Speaker:*  A.L. Costa (Portugal)  

14:40  
**Types of dressing in foot wound management**  
*Speaker:*  S. Seshabhattaru (India)  

15:00  
**Discussion**
15:15 - 15:45 Meeting Room 1-3

**Individualisation of blood pressure targets for people with diabetes and hypertension**

*Chair: L. Ji (China)*

15:15 **ADA**
*Speaker: A. Maheshwari (India)*

15:25 **ACC/AHA**
*Speaker: V. Narsingh (India)*

15:35 **Discussion**
16:00 - 17:15 Meeting Room 1-3

**Cardiovascular risk factors**

*Chair:*  S. Soegondo (Indonesia)  
*Chair:*  U. Sriram (India)

16:00  
**The endothelium in diabetes**
*Speaker:*  D. Harbuwono (Indonesia)

16:20  
**Statin use in people with diabetes: Pros and cons**
*Speaker:*  To be confirmed

16:40  
**Renin-angiotensin-aldosterone system blockade in blood pressure management**
*Speaker:*  To be confirmed

17:00  
**Discussion**
14:00 - 15:45  Meeting Room 4-6

**Can diet modulation help in averting chronic complications**

*Speaker:* A. Ben Nakhi (Kuwait)  
*Speaker:* M. Al Arouj (Kuwait)
16:00 - 17:15  Meeting Room 4-6

Prevention of foot amputation and education in the diabetic foot

Moderator:  A. Bal (India)
Panellist:  M. Ruke (India)
Panellist:  S. Kari (India)
Panellist:  V. Viswanathan (India)
Panellist:  A. Sanghvi (India)
PROGRAMME

FRIDAY 26 OCTOBER
Plenary Lectures

Chair: A. Al Madani (United Arab Emirates)  
Chair: A. El Sayed (Qatar)

09:00  
Diabetes and heart failure: Perfectly imperfect truth - a future prospect  
Speaker: R.P. Sibarani (Indonesia)  

09:30  
Cardiovascular outcomes trials of commonly used antglycaemic medications  
Speaker: D. Rahelic (Croatia)  

10:00  
Discussion
10:15 - 11:15 Hall 4

**Foot treatment strategies**

*Chair:*  A. Ibrahim *(Dominican Republic)*

10:15  
**Managing patients with diabetic foot and critical limb ischaemia**  
*Speaker:*  Z. Xu *(China)*

10:40  
**Offloading in a neuroischaemic foot ulcer**  
*Speaker:*  V. Viswanathan *(India)*

11:05  
**Discussion**
**Prevention of ulcers and amputations**

*Chair:* E. Jude (United Kingdom)  
*Chair:* R. Kesavan (India)

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
<th>Speaker</th>
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<tbody>
<tr>
<td>11:30</td>
<td>Preventing recurrence of the diabetic foot ulcer</td>
<td>A. Bal (India)</td>
<td>042</td>
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<tr>
<td>11:45</td>
<td>Preventing amputations in the developing world: The Indian experience</td>
<td>S. Pendsey (India)</td>
<td>043</td>
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<tr>
<td>12:00</td>
<td>The role of educators in preventing recurrence of ulcers and amputations</td>
<td>S. Salis (India)</td>
<td>044</td>
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<tr>
<td>12:15</td>
<td>Discussion</td>
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</table>
Diabetes and hypoglycaemia

Chair: L.M. Gardete Correia (Portugal)
Chair: B. Saboo (India)

14:30
Hypoglycaemia: Diagnosis and management 045
Speaker: M. Djordjevic (Serbia)

14:50
Hypoglycaemia unawareness 046
Speaker: S.R. Joshi (India)

15:10
Macrovascular impact of hypoglycaemia 047
Speaker: To be confirmed

15:30
Discussion
Hypoglycaemia

Chair: J. Panda (India)
Chair: B.M. Makkar (India)

15:45
Overhyped
Speaker: A. Gupta (India)

15:55
Real
Speaker: L. Rodrigues (India)

16:05
Discussion
16:30 - 17:45 Hall 4

**Diabetes and bone health**

Chair: J. Belkhadir (Morocco)  
Chair: R. Chawla (India)

16:30  
**Skeletal complications of diabetes**  
Speaker: S.R. Aravind (India)

16:50  
**Osteoporosis: An under-appreciated association with diabetes**  
Speaker: T.M.I. Alessa (Kuwait)

17:10  
**Periodontal disease in diabetes**  
Speaker: L.M. Gardete Correia (Portugal)

17:30  
**Discussion**
17:45 - 19:00 Hall 4

**Plenary lectures**

Chair: T. Rege (India)
Chair: S. Rao (India)

17:45  
The diabetic foot: An update  
*Speaker: E. Jude (United Kingdom)*  

18:15  
Risk factors for microvascular complications in children and adolescents with diabetes  
*Speaker: L. Barkai (Hungary)*  

18:45  
Discussion
10:15 - 11:15 Hall 5

**Acute complications in diabetes**

Chair: J. Ahmad (India)
Chair: S. Sadikot (India)

10:15
**Diabetic ketoacidosis: A master class**
Speaker: B. Saboo (India)

10:40
**Hyperosmolar non-ketotic coma**
Speaker: A.H. Zargar (India)

11:05
**Discussion**
11:30 - 12:30 Hall 5

Risk factors for cardiovascular disease

Chair: T.K.M. Easwar (India)
Chair: K. Sai (India)

11:30 Modern management of hypertension in patients with diabetes
Speaker: S.N. Narasingan (India) 057

11:45 Recent trends in treating diabetic dyslipidaemias
Speaker: M. Hassanein (United Arab Emirates) 058

12:00 Novel risk factors leading to cardiovascular dysfunction
Speaker: J. Belkhadir (Morocco) 059

12:15 Discussion
14:30 - 15:45  Hall 5

**Diabetes and the eye**

Chair:  N. Cho (South Korea)  
Chair:  W. Jia (China)

14:30  
Aetiopathogenesis of diabetic retinopathy and diabetic macular oedema  
**060**  
*Speaker:  G. Tan (Singapore)*

14:50  
Can we prevent diabetic retinopathy?  
**061**  
*Speaker:  To be confirmed*

15:10  
Management of diabetic eye disease: Current and future trends  
**062**  
*Speaker:  G. Tan (Singapore)*

15:30  
Discussion
The role of telemedicine in the diagnosis of diabetic retinopathy

Chair:  C. Chun (China)

15:45  Useful  063
   Speaker:  G. Tan (Singapore)

15:55  Useful with caution  064
   Speaker:  To be confirmed

16:05  Discussion
Diabetic nephropathy II

Chair: A. Maheshwari (India)
Chair: P. Jethwani (India)

16:30  Biomarkers to judge the onset and progression of diabetic nephropathy  065
Speaker: R. Birne (Portugal)

16:50  Molecular mechanisms on the pathogenesis of diabetic nephropathy  066
Speaker: L. Fang (China)

17:10  Chronic kidney disease in patients with diabetes: Is it always diabetic nephropathy?  067
Speaker: A. Gupta (India)

17:30  Discussion
10:15 - 11:15 Hall 6

**Diabetes and the liver**

*Chair:* S. Soegondo (Indonesia)
*Chair:* T.P. Shah (India)

10:15  
**Diabetes and non-alcoholic fatty liver disease**
*Speaker:* To be confirmed

10:40  
**Managing diabetes in chronic liver disease**
*Speaker:* S. Singh (India)

11:05  
**Discussion**
11:30 - 12:30  Hall 6

**Diabetes nephropathy I**

*Chair:*  S. Reddy (India)  
*Chair:*  A. Kaul (India)

11:30  Novel risk factors in diabetic kidney disease  070  
*Speaker:*  Q. Li (China)

11:45  Managing patients with progressive diabetic nephropathy: Clinical insights  071  
*Speaker:*  R. Birne (Portugal)

12:00  Managing nephropathy in resource-poor settings  072  
*Speaker:*  J. Ahmad (India)

12:15  Discussion
Reducing cardiovascular risk in patients with diabetic nephropathy

Chair: N. Deshpande (India)
Chair: S. Jaggi (India)

14:30
Common aspects of pathogenic mechanism for diabetic nephropathy and cardiovascular complications
Speaker: D. Rahelic (Croatia)

14:50
Oxidative stress and anti-inflammatory agents in patients with nephropathy: Do they also protect the heart?
Speaker: U. Sriram (India)

15:10
Cardio-renal continuum in diabetes
Speaker: S. Soegondo (Indonesia)

15:30
Discussion
Can type 2 diabetes patients have diabetic retinopathy in the absence of diabetic nephropathy?

Chair: R. Kovil (India)
Chair: A. Bhansali (India)

15:45
Yes
Speaker: S. Gupta (India)

15:55
No
Speaker: To be confirmed

16:05
Discussion
16:30 - 17:45 Hall 6

**Diabetic foot infections**

*Chair: M. Chawla (India)*
*Chair: T. Kamat (India)*

16:30  **Implementing the IDSA classification into clinical practice**  
*Speaker: R. Kovil (India)*

16:50  **A stepwise approach to the acutely infected diabetic foot**  
*Speaker: A.L. Costa (Portugal)*

17:10  **The use of imaging to diagnose diabetic infection**  
*Speaker: A. Rastogi (India)*

17:30  **Discussion**
10:15 - 11:15 Meeting Room 1-3

**Autonomic neuropathy**

**Chair:** L. Rodrigues (India)  
**Chair:** B. Sosale (India)

10:15  
**Cardiac autonomic neuropathy**  
*Speaker:* J. Belkhadir (Morocco)  

10:30  
**Gastro-intestinal tract dysfunction in diabetic autonomic disorders**  
*Speaker:* S. Phatak

10:45  
**The urinary bladder in autonomic dysfunction**  
*Speaker:* A.S. Bhoraskar (India)

11:00  
Discussion
11:30 - 12:30 Meeting Room 1-3

The mind should never be forgotten

Chair:  J. Panda (India)
Chair:  J. Kesavadev (India)

11:30 The relationship between depression and diabetes: Causal or casual? 084
Speaker:  A. Jagdeesha (India)

11:45 The association between type 2 diabetes, obesity and brain dysfunction 085
Speaker:  P. Vardi (Israel)

12:00 Cognitive dysfunction in diabetes 086
Speaker:  U. Dhruv (India)

12:15 Discussion
14:30 - 15:45 Meeting Room 1-3

**Nutrition**

Chair:  S. Salis (India)
Chair:  S. Shah (India)

14:30  **Diabetes and heart disease: Which fats to eat?**  087
Speaker:  T. Milenkovic (Macedonia)

14:50  **Nutritional interventions in patients with diabetes**  088
Speaker:  A. Misra (India)

15:10  **Impact of regional variation of diet on diabetes complications**  089
Speaker:  V. Nambiar (India)

15:30  **Discussion**
Should a low-card, high-fat diet be used in patients with diabetes complications?

Chair:  J. Srinath (India)
Chair:  V. Nambiar (India)

15:45  
Yes  090
Speaker:  S. Joshi (India)

15:55  
No  091
Speaker:  R. Gupta (India)

16:05  
Discussion
16:30 - 17:45 Meeting Room 1-3

**Footwear**

Chair: T. Rege (India)
Chair: H. Chandarana (India)

16:30  
**Footwear for people at high risk of diabetic foot**  
Speaker: S. Pendsey (India)

16:50  
**The role of insoles for prevention of foot problems in diabetes**  
Speaker: J. Kannampilly (India)

17:10  
**What after amputation: Recommendations for rehabilitation and prostheses**  
Speaker: V. Viswanathan (India)

17:30  
Discussion
Heart failure in diabetes: Is it different and how do we manage it?

**Moderator:** S.C. Agarwal (India)

**Panellist:** S. Tanna (India)

**Panellist:** D. Harbuwono (Indonesia)

**Panellist:** R.P. Sobarani (Indonesia)
11:30 - 12:30 Meeting Room 4-6

**Gadgets for the diabetic foot**

Chair:  A. Ibrahim (Dominican Republic)
Chair:  A. Bal (India)

**11:30**  
**Monofilament, vibration perception threshold and tuning fork**  
*Speaker:  M. Choudhari Kale (India)*

**11:45**  
**Vascular Doppler and ankle-brachial index**  
*Speaker:  H. Chandarana (India)*

**12:00**  
**Pressure plate analysis**  
*Speaker:  V. Vachharajani (India)*

**12:15**  
**Discussion**
Diabetes and sexual dysfunction

Chair:  P. Jethwani (India)
Chair:  S. Rao (India)

14:30  Erectile dysfunction
Speaker:  Y. Vardi (Israel)

15:00  Let’s talk female sexual dysfunction
Speaker:  D. Jumani (India)

15:30  Psychosocial aspects of sexual dysfunction in people with diabetes
Speaker:  M. Bhartia (India)

16:00  Discussion
16:30 - 17:45 Meeting Room 4-6

Importance of social media and communications in education and prevention of diabetic complications

Moderator: S. Jothydev (India)
Panellist: J. Kesavadev (India)
Panellist: D. Rahelic (Croatia)
Panellist: G. Krishnan (India)
PROGRAMME

SATURDAY 27 OCTOBER
Plenary lectures

Chair:  J. Ahmad (India)
Chair:  E. Jude (United Kingdom)

09:00  Classifications of diabetic neuropathy: How clinically useful are they?
       Speaker:  R. Malik (Qatar)  101

09:30  The importance of team management for the diabetic foot: Equal roles of the
       diabetologist, vascular surgeon and podiatrist
       Speaker:  A. Ibrahim (Dominican Republic)  102

10:00  Discussion
10:15 - 11:15 Hall 4

**Trending**

*Chair:* L. Rodrigues (India)  
*Chair:* A.H. Zargar (India)

**10:15**  
**Do sex and gender play a role in diabetes complications?**  
*Speaker:* M. Bhartia (India)  

**10:40**  
**Prevention of diabetes complications: How early should we start?**  
*Speaker:* A. El Sayed (Egypt)

**11:05**  
**Discussion**
11:30 - 12:30 Hall 4

**Other complications**

Chair:  S.R. Joshi (India)  
Chair:  S.R. Aravind (India)

11:30  
**Diabetes and cerebrovascular disease**  
Speaker:  C. Vasanth Kumar (India)  

11:45  
**Diabetes and skin manifestations**  
Speaker:  V.K. Mittal (India)  

12:00  
**Diabetes and cancer**  
Speaker:  M. Chawla (India)  

12:15  
Discussion
14:30 - 16:15   Hall 4

**Treatment of complications**

*Chair: W. Jia (China)*
*Chair: U. Sriram (India)*

14:30  
**Time to overcome multifactorial therapeutic inertia**  
*Speaker: B. Saboo (India)*

15:00  
**Use of newer technologies in patients with diabetes complications**  
*Speaker: R. Mehta (India)*

15:30  
**Antihyperglycaemic drugs and their impact on diabetic complications**  
*Speaker: D. Rahelic (Croatia)*

16:00  
**Discussion**
10:15 - 11:15 Hall 5

**Treatment of diabetic foot**

*Chair: A. Ibrahim (Dominican Republic)  
Chair: E. Jude (United Kingdom)*

10:15

**Managing Charcot’s foot**

*Speaker: A.L. Costa (Portugal)*

10:40

**A team-based approach to managing the diabetic foot**

*Speaker: V. Viswanathan (India)*

11:05

**Discussion**
Lectures

Chair: C. Vasanth Kumar (India)
Chair: R. Sahay (India)

11:30
Targets for glycaemia, dyslipidaemia and hypertension: How low should we go?
Speaker: S. Reddy (India)

12:00
Prevalence and screening for complications in youths with diabetes
Speaker: L. Barkai (Hungary)
14:30 - 16:15  Hall 5

Newer updates

Chair:  C. Chun (China)
Chair:  M. Djordjevic (Serbia)

14:30  Is brain islet implant a potential treatment for Alzheimer's disease?
Speaker:  P. Vardi (Israel)

15:00  Islet transplants: Now and later
Speaker:  J. Kesavadev (India)

15:30  Stem cell therapy
Speaker:  A. Bhansali (India)

16:00  Discussion
10:15 - 11:15 Hall 6

**Cardiovascular complications**

Chair:  J. Belkhadir (Morocco)
Chair:  M. Djordjevic (Serbia)

10:15  
**Does an obesity "paradox" exist for cardiovascular dysfunction?**
*Speaker:* T.P. Shah (India)

10:40  
**Diabetic cardiomyopathy: Fact or fiction?**
*Speaker:* K. Tripathi (India)

11:05  
**Discussion**
11:30 - 12:30 Hall 6

**Is universal salt restriction useful in preventing cardiovascular complications?**

*Chair:* V. Nambiar (India)  
*Chair:* R. Gupta (India)

11:30

*There is evidence*

*Speaker:* S. Shah (India)

11:50

*The evidence does not stand up to scrutiny*

*Speaker:* J. Srinath (India)

12:10

*Discussion*
Oral Presentations - Diabetic Foot

Chair: To be confirmed

14:30
Characteristics of young Indigenous patients admitted with diabetic foot disease to a major Northern Australian hospital
J. Anderson, P. Lazzarini, N. Nandi, A. Mclean, S. O’rourke, A. Sinha

14:40
Effect of foot temperature controlling unit on diabetes patients’ blood glucose level
H. Hyungseob, S. Euiseong, L. Seungtaek, P. Sangkeon, J. Suwang, S. Kyoung-Young, W. KIM, S. Laiwon

14:50
Index of plantar pressure alters with prolonged diabetes duration
L. Xu

15:00
First new drug with over 60% complete wound closure in diabetic foot ulcers from phase III trial interim analysis report
S.C. Chang, J.C. Chen

15:10
Detection of irregular first metatarsal lengths to prevent diabetic plantar ulceration - an application for telemedicine
A.T. Thompson, B. Zipfel, M. Muzigaba, C. Aldous

15:20
Correlation between basal metabolic rate & insulin resistance among type 2 diabetes mellitus with peripheral neuropathy
S.K. Amaravadi, A.M. Gundmi, S. Ba, V. K
15:30
Role and place of X-ray endovascular procedures in treatment of diabetic foot syndrome
S. Ismailov, T. Kamalov

15:40
Mapping research and innovation activities in diabetic neuropathy: a case of diabetic-foot research in India
S.K. Jena, B. Mishra, A. Yadav, P. Desai

15:50
Combining diabetic foot and eye screening - a feasibility study
J. Lewis, K. Hutchinson

16:00
Relationship between prognosis of diabetic foot lesion and hemodialysis in Japanese
T. Hiyoshi, M. Yoshitsugu

16:10
End-stage vascular disease in 10 patients treated with adipose-derived stromal vascular fraction:
3 year outcomes study
M. Carstens, R. Cortes, A. Gómez, D. Correa
10:15 - 11:15  Meeting Room 1-3

**Obesity**

*Chair: D. Kapoor (India)*
*Chair: T. Milenkovic (Macedonia)*

10:15  
**Diabesity: The clinical concern**
*Speaker: S.R. Joshi (India)*

10:40  
**Metabolically obese normal weight phenotype**
*Speaker: B.M. Makkar (India)*

11:05  
**Discussion**
11:30 - 12:30  Meeting Room 1-3

**Surgical approach to diabetic foot ulcers**

*Chair:*  R. Kesavan (India)  
*Chair:*  T. Rege (India)

11:30  
**For prevention**  
*Speaker:*  S. Bhandari (India)

11:55  
**Management of high risk diabetic foot**  
*Speaker:*  M. Ruke (India)

12:20  
**Discussion**
**Oral presentations - Kidney, eye, cardiovascular complications**

*Chair:* S.R. Joshi (India)  
*Chair:* S. Rao (India)

**14:30**  
Individualized prevention and treatment strategy based on HOMA2 in clinical practice in type 2 diabetes patients  

**14:40**  
High rate of diabetic limb amputation in Indigenous Australians on dialysis: a wake-up call for diabetes prevention  
*U. Malabu, R. Gilhotra, V. Vangaveti, G. Kan*

**14:50**  
The impact of moving diabetic eye screening from the eye to the diabetic clinic in a Tanzanian setting  
*R. Kessy, C. Mhina, A. Sanyiwa, F. Chiwanga, J. Kilemile, D. Mabey, E. Johnson, A. Dale*

**15:00**  
Study of coronary risk factors in type 2 diabetes male patients having erectile dysfunction (ED)  
*S.C.S. Dutta*

**15:10**  
Phenotype differences between type 1 and type 2 diabetes in patients with a long evolution of the disease  
*O.A. Parlitéanu, I.R. Voicu, A.E. Nica, C. Topea, G. Baraghin, C. Dobrianschi, G. Radulian*

**15:20**  
Burden of cardiovascular risk factors in ultrasonographically diagnosed cases of non-alcoholic fatty liver disease  
*D.S. Chatterjee, S. Kunti, D. Maitra, I. Chakraborty, B. Majumder*

**15:30**  
Cystatin C as a marker of glomerular filtration rate in type 2 diabetic nephropathy  
*P. Gyawali, B. Jha, K. Raut*
14:30 - 16:15 Meeting Room 1-3

15:40
Evaluation of circulating Omentin-1, Apelin and Chemerin as novel biomarkers of diabetic retinopathy in T2DM patients
*M. Yasir, G.P. Senthilkumar, K.R. Babu, M. Vadivelan*

15:50
Day-to-day glycemic variability and the incidence of MI complications in the first 72 hours post MI in diabetic patients
*R. Contreras, D. Mejia, A. Ibrahim*

16:00
Serum level of fibronectin in hypertensive patients with type 2 diabetes and obesity
*O. Mogilyntska, L. Mohylntska*
10:15 - 11:15  Meeting Room 4-6

**Insulins and other injectables in managing diabetes and its complications**

**Moderator:**  To be confirmed

**Panellist:**  To be confirmed
**Panellist:**  L.M. Gardete Correia (Portugal)
**Panellist:**  J. Kesavadev (India)
11:30 - 12:30 Meeting Room 4-6

The clinical approach to managing a person with early nephropathy

Moderator:  R. Birne (Portugal)
Panellist:  D. Rahelic (Croatia)
Panellist:  Q. Li (China)
Panellist:  J. Ahmad (India)
Panellist:  L. Fang (China)
**Oral presentations - Diabetes complications**

*Chair: S. Gupta (India)*
*Chair: A. Gupta (India)*

**14:30**
Baseline Data of the Mongolian Diabetes Study (MONDIA) 146
*A. Khasag, E. Yanjmaa, E. Dulamjav*

**14:40**
Lifestyle factors and macro- and micro-vascular complications among people with type 2 diabetes in Saudi Arabia 147
*M. Alramdan, D.J. Magliano, H.A. Alhamrani, A.J. Alramadan, S.M. Alameer, G.M. Amin, W.A. Alkherras, N.A. Bayaseh, B. Billah*

**14:50**
Preventing diabetes complications with telemedicine - Insights gained from a real-world 20 year follow-up data 148

**15:00**
The prevalence of diabetic retinopathy in China: A nationwide survey with artificial intelligence-based cloud platform 149
*B. Yang, J. Liu, H. Pan, L. Chen, L. Zhang, Q. Li, Y. Xue, Q. Wang, J. Kuang, L. Chen, F. Wang, N. Wang*

**15:10**
Data of anti-diabetic drugs in patients with renal impairment at the time of FDA approval 150
*A. Rajani, D. Gude, R. Jha, M. Fegade, D. Ts*

**15:20**
Increased proportion of gram-negative bacteremia in diabetic patients: A retrospective analysis 151
*S. Kassem, Y. Shihadeh*
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<tr>
<th>Time</th>
<th>Session Title</th>
<th>Authors</th>
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<tbody>
<tr>
<td>15:30</td>
<td>Leisure physical activity in past is significant predictor of cardiac autonomic neuropathy in type 2 diabetes mellitus</td>
<td><em>P. Bhati, J.A. Moiz, M.E. Hussain</em></td>
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<tr>
<td>15:40</td>
<td>Impact of ≥7% weight loss in the management of non-alcoholic fatty liver disease in type 2 diabetics</td>
<td><em>K. Roy, U. Iyer, R. Shah, T. Vaishnav</em></td>
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<tr>
<td>15:50</td>
<td>Subclinical cardiac autonomic dysfunction in type II diabetes mellitus</td>
<td><em>A. John, S. Avangapur, S. Magadi Umeshchandra, K. Udupa, P. Vasuki, A. Mahadevan, R.A. Kumar, M. Shekhar, S. Talakad N</em></td>
</tr>
<tr>
<td>16:00</td>
<td>Diabetic autonomic neuropathy in the pathogenesis of vascular complications</td>
<td><em>I. Kurnikova, P. Ogurtsov, R. Sargar</em></td>
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POSTER DISPLAY

25-27 OCTOBER
Posters will be on display as of 14.00 on Thursday 25 October.

Authors of odd-numbered posters will be at their posters from 12.30 to 14.30 on Friday 26 October.

Authors of even-numbered posters will be at their posters from 12.30 to 14.30 on Saturday 27 October.
**Foot - Diabetic Peripheral Neuropathy and Charcot**

Validation of “SPARSH”- innovative new device for the early detection of diabetic peripheral neuropathy  
*M. Arun* (India)  
P-001

Vascular and neurological impairment in patients with type 2 diabetes mellitus and foot ulcer  
*P. Ganji, A. Sachan, V. B, S. V, M. Y* (India)  
P-002

One year review of diabetes patients attending to foot clinic at Yangon General Hospital  
*Z.C. Pyone, K.S. Than, M.W. Aung* (Myanmar Burma)  
P-003

The organizational structure of specialised help to patient with diabetic foot syndrome in Uzbekistan  
*N. Ibragimova, T. Kamalov, K. Shakirov, L. Kokareva, O. Platonova* (Uzbekistan)  
P-004

Evaluation and follow-up of patients with type 2 diabetes: The importance of Screen, Treat, Educate and Prevent (STEP)  
*D.A. Padhye, A. James, J. Pawar, S. Sudhakaran, N. Pathare* (India)  
P-005

Continuous Glucose Monitoring (CGM) as additional tool in assessment of polyneuropathy risk in type 2 diabetes  
*T. Totomirova, I. Daskalova, M. Arnaudova* (Bulgaria)  
P-006

Clinical and biological particularities of type 2 diabetic patients diagnosed with polyneuropathy  
*A.E. Nica, G. Baraghin, C. Topea, I.V. Vinereanu, O.A. Parliteanu, C. Dobjanschi, G. Radulian* (Romania)  
P-007

Diabetic foot risk assessment of patients with type II diabetes in a Tertiary hospital in Nairobi, Kenya  
*J. Nduati Ngoyo, S. Gatimu, E.W. Njenga* (Kenya)  
P-008

Peripheral neuropathy: prevalence, determinants and effect of patients' diabetes knowledge on peripheral neuropathy  
*O. Ezeajugh, V. Odili, J.F. Chukwu* (Nigeria)  
P-009
OPD experience of diabetic peripheral neuropathy in new onset diabetes – an observation study
R. Mohammed, I. Ahmed, R.K. Jaiswal (India)

Safety and efficacy of pregabalin and amitriptyline for painful diabetic neuropathy and quality of life of patients
S. Chandni, A. U Thejkumar, N. Manikath, B. George, S. Sadan E (India)

Correlation between VPT and ratio of forefoot PPP and rearfoot PPP in patients with type 2 diabetes mellitus
M. Choudhari Kale, A. Vaidya (India)

Peripheral neuropathy risk in T2DM patients through assessment of vibration perception threshold: a screening report

Prevalence of peripheral neuropathy in type 2 diabetes with postmenopausal osteoporosis in Udupi District
S. Gundmi, A.G. Maiya, A.K. Bhat (India)

Hydrogels as an alternative treatment for callus formation in diabetes foot ulcers: a report of three cases
S. Anisah, A. Wibudi, S. Setyowati, N. Magfira (Indonesia)
Foot - Peripheral Arterial Disease

Prevalence of peripheral arterial disease among type 2 diabetes mellitus in coastal Karnataka
E. Arora, A. Maiya, T. Devasia, R. Bhat, G. Kamath (India)

Correlations between parameters of regional hemodynamics in patients with neuroischemic form of diabetic foot syndrome
T. Kamalov, S. Ismailov (Uzbekistan)

The indicating value of ankle-branchial index screening for the cardiovascular disease in type 2 diabetes patients
L. Xu, R. He, Z. Hui, L. Lianxi, L. Fang, J. Weiping

Can inherited thrombophilia influence the effect of autologous cell therapy in patients with ischemic diabetic foot?
M. Dubsky, A. Nemcova, A. Jirkovska, R. Bem, V. Fejfarova, J. Hazdrova, K. Sutoris (Czech Republic)

A study on ABI and TBI in type 2 diabetes mellitus patients with PAD and their correlation with CIMT
B. Santosh, R. Boddula, D. Prabakar, A. Venkatanarasu, C. Chinte, V. Tickoo (India)

Development and validation of a risk prediction score for lower extremity arterial disease in patients with diabetes
X. Zhang, Z. Xu, X. Ran, L. Ji (China)

The effectiveness of kinesiotaping in the treatment of edema in diabetic patients
M. Prystupiuk, M. Borošák, I. Onofriichuk, L. Prystupiuk, L. Naumova, M. Naumova (Ukraine)
Foot - Ulcers and Infection

Placement of forefoot bend in women’s shoes – a risk factor for ulceration in diabetes.
A.T. Thompson, C. Aldous, B. Zipfel, M. Muzigaba (South Africa)  
P-023

Links between oral health and diabetes: The mouth as early warning system
A. Choudhury (Bangladesh)  
P-024

Treatment of necrotizing fasciitis with combined longitudinal incision and NPWT in diabetic patients
G. Vadasz, I. Rozsos (Hungary)  
P-025

Relationship between serum magnesium and complications of diabetes in type 2 diabetes mellitus patients
A. Gupta, S. Abbas (India)  
P-026

Analysis of ipsilateral and contralateral foot through amit jain’s triple assessment for foot in diabetes
S. Jabbar, A. Jain, G. S (India)  
P-027

Prevailing practices, attitudes & opinions regarding diabetic foot ulcer among health professionals in South India
M. Aleemuddin, F. Farishta, V. Srinivas (India)  
P-028

Diabetic foot self-care practice among patients with type 2 diabetes mellitus in a tertiary hospital in Indonesia
I.A. Paramitha, M.I. Mokoagow, M. Epriliawati, N. Soebijanto (Indonesia)  
P-029

Risk factors for foot ulcer in individuals with diabetes mellitus - a case control study
W. Ahmed N, P. G Pai, T. Sa (India)  
P-030

Impact of HBOT on angiogenic factors and its molecular targets in both tissue biopsy and circulation of DFU
R. Kesavan, D. Umapathy, S.S. Changam, V. Ramachandran, R. Kunka Mohanram (India)  
P-031
Negative pressure wound therapy in diabetic foot ulcer, Mauritius
A. Jodheea-Jutton, A. Bhaw-Luximon, S. Hindocha (Mauritius)

Is social deprivation associated with amputation risk secondary to diabetic foot disease?
J. Hayes, J. Stephens, S. Bain, C. Topliss, R. Thomas, D. Price (United Kingdom)

Preventive diabetic foot program – an experience of district patient organization
I. Daskalova, T. Totomirova (Bulgaria)

MBL and ESBL producing Acinetobacter species isolates causing amputation in diabetic foot ulcer infections
D.M. Khan, M.S. Moosabba, I.R. Venkatakrishna (India)

An investigation of mortality and foot morbidity following minor foot amputations in patients living with diabetes
I.M. Vassallo, A. Gatt, K. Cassar, C. Formosa (Malta)

Role of documenting serial images in diabetic foot ulcer management
V. Gadadharan, S. K (India)

Characteristics of diabetic foot lesions in Japanese elderly
T. Hiyoshi, M. Yoshitsugu (Japan)

The prevalence of diabetic foot ulcers and associated risk factors among patients with type 2 diabetes mellitus
T.S. Tun, S.T. Tun, P.M.M. Min, K.W. Tun, T. Kyaw (Myanmar Burma)

MicroRNA-23c suppresses angiogenesis by targeting tissue specific angiogenic factors among diabetic foot ulcer
A. Karan Naresh, U. Dhamodharan, R. Vimal Kumar, K. Rajesh, K.M. Ramkumar (India)

Study of the effect of negative pressure on the formation of new vessels in the ulcer in patients with diabetic foot
M. Prystupiuk, I. Onofriichuk, L. Prystupiuk, L. Naumova, M. Naumova (Ukraine)

Pharmacotherapy, clinical outcomes and quality of life in patients with diabetic foot syndrome: a cross sectional study
E. Pasangha, P. Devi, B. George, B. Kb (India)
A study on awareness of foot care and foot related problems among patients with diabetes mellitus  
A. Venkatanarasu, R. Boddula, B. Santosh, C. Chinte, V. Tickoo, J. Durgam, S. Durgam (India)  
P-043

Regeneration medicine for cure of diabetic foot ulcer with herbs by genetic transription  
K. Chilukuri (India)  
P-044

A scientific approach to improve the lifestyle of patients with diabetic foot ulcer  
P. R, S. Ganasundaram, S.B. Giridharan, B.N. Das, V. Viswanathan (India)  
P-045

One man team approach for diabetic foot amputation prevention  
K. Shankhdhar (India)  
P-046

The Samadhan System of offloading the diabetic foot.  
K. Shankhdhar, S. Shankhdhar (India)  
P-047

Bone resorption maker –lysylpyridinoline: a novel test for diagnosing diabetic foot osteomyelitis – a preliminary report  
U. Malabu, O. Hayes, V. Vangaveti (Australia)  
P-048

Characteristics and prognosis of patients with diabetic foot ulcer admitted at a time in a diabetic foot care center  
G.K. Sreehari, A. Vijayakumar, V. Gadadharan, S. Krishnakumar, R. Vijayakumar (India)  
P-049

Quantitative analysis of plantar fascia biomechanical parameters in diabetic patients using myotonometry  
H. S, A. Srivatsa, L.L. S, S. Ramakrishnan (India)  
P-050

Investigating the use of low frequency ultrasonic debridement in the treatment of diabetic foot ulcers  
L. Michailidis, S. Bergin, C. Williams, T. Haines (Australia)  
P-051

Practise of diabetic foot care in a rural, tier-2 town in South India  
P Parthasarathi (India)  
P-052

Malagasy beliefs and diabetic foot  
P-053
Comparative study of diabetic foot infection with levels of HbA1c and their susceptibility pattern
D.M. Khan, F.R. Menzes, M.S. Moosabba, I.V. Rao (India)

Efficacy of Curcuma longa (SNEC 30) in the management of diabetic foot in patients of type 2 diabetes mellitus
V. Awasthi, N. Verma, A. Verma, A. Maheshwari, G. Lamgora (India)

Progression of foot complications among patients with type 2 diabetes in Singapore
T. Riandini, M.P. Toh, D.Y. Liu, C.S. Tan, K. Venkataraman (Singapore)

Knowledge of diabetic foot and its risk factors among the residents of Pokhara Valley, Nepal: a descriptive study
B. Sathian, A. Singh, S.H. Subramanya, B. Roy, A. Ghosh, I. Banerjee (Nepal)

Annual assessment of the spectrum of pathogenic microorganisms in infected diabetic foot ulcers in a tertiary center

Increasing access to foot care for the through a community based diabetes health program for diabetes in the Philippines
M. Ruiz (Philippines)

Clinical profile and associated factors of wound complications in diabetic foot ulcer - Jakarta, Indonesia
W. Wiyono, I.A. Kshanti, N. Magfira (Indonesia)

Amit Jain's classification for diabetic foot - the newly proposed universal classification supreme for diabetic foot
A.K.C. Jain, A. Hc, K. Kumar, S. Kumar, H. Kumar (India)

Topical wound oxygen therapy towards mitigation of financial burden of diabetic foot ulcer disease in India
N. Muduli (India)
**Cardiovascular Risk Factors**

Clinical study to determine efficacy of trigonella foenum-graecum extract in patients with type 2 diabetes

*A. Goel (India)*

A study to assess prevalence of diabetes mellitus and its associated risk factors among adult residents of Urban Khammam

*N. Karlapudi, D. Nallamothu (India)*

Analeptic effect of vitamin B6 on hyperglycemia, oxidative stress and DNA damage in alloxan induced diabetic rats

*K. Abdullah, N. Imrana (India)*

Eligibility criteria of SGLT2i CVOTs within DISCOVER Study: Implications for type 2 diabetes population in India

*A. Mithal, S. Kalra*

The efficacy of DSMSET to the predictors of health behaviors and HbA1C: basis for prevention of DM complications

*R. Custodio, J.N. Victorino, M.R.J. Estuar (Philippines)*

Cholecalciferol improves insulin resistance and sensitivity in type 2 diabetic patients

*M. Abd El-Ghany, M. Ghonem, J. Mazroa, N. El-Mashad, M. Abdul-Aziz (Egypt)*

Treating the aetio-pathophysiology of diabetes - the ayurveda perspective

*D.Z. Buch, R. Vasudevan (India)*

Improving the cascade of care for hypertension and diabetes: The HealthRise Project

*N. Chaudhury (USA)*

An epidemiological study of diabetes and its complications amongst urban and rural adult population of Lucknow district

*D.A. Arun, N.S. Verma, A. Maheshwari (India)*
HbA1c level in people with type 2 diabetes newly diagnosed during active screening

A. Alieva, S. Ismailov, G. Rakhimova (Uzbekistan)

HbA1c level in people with type 2 diabetes newly diagnosed during active screening

A. Alieva, S. Ismailov, G. Rakhimova (Uzbekistan)

Changes of leukocyte telomere reflecting extreme cardio-cerebral vascular events in diabetic patients

Y. Yang, J. Liu (China)

Investigation of hypertension incidence and genetic risk factors in diabetic patients

F. Du, D. Bin Hong, W. Wei Min, W. Dan (China)

Relationship between hypertriglyceridemic waist phenotype and metabolic risk factors in adult population

N. Verma, H. Reddy, S. Saxena, S. Mishra, R. Saini (India)

Cardiovascular (CV) risk factor profile of young Indian type 1 diabetes patients

A. Baptist, S. Shah, R. Thigale, S. Degloorkar, K. Jog, S. Salvi, C. Yajnik (India)

Anti-diabetic activity of curcumin, quercetin and comparison with pioglitazone in streptozocin induced diabetic rats

D.D. Mukerjee, S. Khattri (India)

Arterial hypertension in patients with diabetes taking anabolic steroids with progestine activity

P. Popov, I. Kurnikova (Russia)

Relationship of bacteria Akkermansia muciniphila with metabolic syndrome in ecuadorian workers

B. Maggi, H. Torres, O. Aníbal, D. Nardy, J. Monserrate (Ecuador)

Study on patient’s demographics, on Teneligliptin combination therapy in Real world practice with Metformin. (STAR-2)

D. Patel, B. Saboo (India)
Coronary Heart Disease and Heart Failure

Total Events of HFpEF in patients with type 2 diabetes treated in internal medicine clinics in Bogor, Indonesia

M. Taradika, R.P. Sibarani (Indonesia)
Diabetic Eye Disease

Impact of counselling and annual dilated retinal examination in preventing blindness in a tertiary care diabetic centre

M. Thiruvillamalai, S. Easwar (India)  P-083

Comparative analysis of the screening and register data on diabetic retinopathy prevalence in Uzbekistan

N. Ibragimova, N. Normatova, R. Trigulova (Uzbekistan)  P-084

Eye of horus on early-stage diabetic retinopathy: automated diabetic retinopathy screening system based on deep learning


Prevalence of diabetic retinopathy in type 2 DM patients attending a diabetes clinic in South Central India

M. Choudhari Kale (India)  P-086

Diabetic retinopathy and thyroid dysfunction - An association

R.R. Mudhol, S.V. Turamari, R. Mudhol (India)  P-088

Diabetes can repeatedly attack the eye and face

A. Dey (India)  P-089
Diabetes and Kidney Disease

Dapagliflozin in the management of T2DM: a real world evidence study in Indian patients—interim analysis of 500 patients
V. Viswanathan, K.P. Singh (India)

Glycaemic control in 3140 participants with T2DM initiating second-line therapy: the DISCOVER study, India subset
S. Kalra, K.P. Singh, A. Mithal (India)

Association of polymorphism of adiponectin gene with concentration of adiponektin in blood in patients with type 2 DM
Z. Akhmedova, N. Heydarova, S. Orujeva (Azerbaijan)

Effect of Tibetan Triphala medicine on Wnt/β-catenin signaling pathway and incretin
F. Shandan (China)

Effectiveness and safety of Teneligliptin in Indian patients with diabetic kidney disease
R. Kumar, A. Rathod, S. Suryawanshi (India)

The effect of miR-877-3p on apoptosis of renal tubular epithelial cells in diabetic kidney disease
M. Zou, Y. Jia, M. Xue, F. Hu, Z. Zheng, Y. Yang, Y. Xue (China)

Nutritional illiteracy among gestational diabetes women of Kerala: a missed way to prevent early DKD
U.V. Sankar (India)

Egr1 mediates LncRNA Arid2-IR to promote extracellular matrix production in diabetic kidney disease
Y.L. Yang, Y. Xue (China)

Experiential learning, high blood sugar and kidney model through diabetes care
B. Wongprasert (Thailand)
Inhibition of PHLPP1 by Morin contributes to Fox01 degradation through Nrf2/MDM2 axis during diabetic nephropathy  
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Attenuation of diabetic nephropathy by a traditional formulation from Ayurveda  
Y. Kulkarni, S. Suryavanshi, M. Garud, K. Barve, V. Addepalli, S. Utpat (India)

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Liraglutide improves nonalcoholic fatty liver disease (NAFLD) via MiR-124a/ATGL/Sirt1 pathway
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The clinical application of dynamic blood glucose monitoring after diabetic ketoacidosis
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Efficacy of Curcuma longa in the management of periodontitis in patients of type 2 diabetes mellitus
D.S. Rastogi, N. Verma, A. Verma, A. Maheshwari, G. Lamgora (India)

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Cardiac autonomic neuropathy in persons with type 2 diabetes mellitus
S. Bawankule (India)

“A byte a day, keeps complications away”
M. Prabhath, S. Umakanth, A. Maiya, S. Mayya, P. Saraswat, S. Hebbar, N. Shastry, V. Upadya (India)

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Reduced ficolin-3-mediated lectin complement pathway activation among T2DM patients having urinary tract infections
L.J. Barkai, E. Sipter, D. Csuka, Z. Prohászka, N. Hosszúfalusi (Hungary)

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A case of Mauriac Syndrome - lest we forget
A. Ray, S. Siddhanta, N. Sengupta, P. Sahana, A. Baidya, S. Goswami, R. Kumar, S. Rabindranath (India)
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Emergency Room’s Nurses Knowledge on Insulin Pen Injection in Tertiary Hospital in Indonesia

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Knowledge of type 2 diabetic patients about their condition in Kimpese Hospital diabetic clinic, DRC

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Combining fluid shear stress and melatonin treatment for effective regulation of adipogenesis

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PERK-eIF2α pathway regulates expression and degradation of glucose transporters during diabetic proteotoxicity in liver

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Sodium chloride and diabetic complications

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Beneficial effects of catechin-a natural phenolic compound in cardiovascular autonomic neuropathy in diabetes  
*S. Suryavanshi, Y. Kulkarni, V. Addepalli (India)*  

Role of tannins in the management of diabetic complications  
*A. Laddha, Y. Kulkarni (India)*  

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*A. Mithal, P. Shamanna (India)*
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