

Appendices

Appendix I

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Appendices

Appendix II

The following reports and guidelines have been referred to in this document:

- (i) World Health Organization Consultation Report. Definition, Diagnosis and Classification of Diabetes Mellitus and its Complications, 1999.
- (ii) American Diabetes Association. Committee Report. Diagnosis and Classification of Diabetes Mellitus. *Diabetes Care* 1997; 20(7): 1183–97.
- (iii) The Malaysian Consensus. Practice Guidelines for: Diabetes Mellitus Type 2 (NIDDM), 1996.
- (iv) European NIDDM Policy Group. A Desktop Guide for the Management of Non-insulin-dependent Diabetes Mellitus (NIDDM), 1993.
- (v) American Diabetes Association. Type 2 diabetes in children and adolescents. *Diabetes Care* 2000; 23; 381–9.
- (vi) International Diabetes Federation – Western Pacific, World Health Organization – Western Pacific, Secretariat of the Pacific Community. Plan of Action for the Western Pacific Declaration on Diabetes, 2000–2005. Manila: Philippines, 2001.
- (vii) World Health Organization – Western Pacific Region, the International Association for the Study of Obesity and the International Obesity Taskforce. Perspective: Redefining Obesity and its Treatment, February 2000.
- (viii) United Kingdom Prospective Diabetes Study (UKPDS 55). Relationship between ethnicity and glycemic control, lipid profiles, and blood pressure during the first 9 years of type 2 diabetes. *Diabetes Care* 2001; 24(7): 1167–74.
- (ix) United Kingdom Prospective Diabetes Study (UKPDS 51). Cost-effectiveness analysis of intensive blood-glucose control with metformin in overweight patients with type II diabetes. *Diabetologia* 2001; 44(3): 298–304.
- (x) United Kingdom Prospective Diabetes Study. The natural history of diabetes-related complications: the UKPDS experience. *Diabetes Obes Metab* 1999; 1 (Suppl. 2): S7–13.
- (xi) United Kingdom Prospective Diabetes Study. The role of blood glucose-lowering drugs in the light of the UKPDS. *Diabetes Obes Metab* 1999; 1 (Suppl. 2): S14–23.
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- (xiii) United Kingdom Prospective Diabetes Study. Association of glycaemia with macrovascular and microvascular complications of type 2 diabetes (UKPDS 35): prospective observational study. *BMJ* 2000; 321(7258): 405–12.
- (xiv) United Kingdom Prospective Diabetes Study (UKPDS). Effects of glucose and blood pressure control on complications of type 2 diabetes mellitus. *Cleve Clin J Med* 1999; 66(4): 247–53.
- (xv) United Kingdom Prospective Diabetes Study. Effect of intensive blood-glucose control with metformin on complications in overweight patients with type 2 diabetes (UKPDS 34). *Lancet* 1998; 352(9131): 854–65.
- (xvi) The Scandinavian Simvastatin Survival Study (4S). Randomised trial of cholesterol lowering in 4444 patients with coronary heart disease. *Lancet* 1994; 344(8934): 1383–9.
- (xvii) The MICRO-HOPE Study. Rationale and design of a large study to evaluate the renal and cardiovascular effects of an ACE inhibitor and vitamin E in high-risk patients with diabetes. The MICRO-HOPE Study. Microalbuminuria, cardiovascular, and renal outcomes. Heart Outcomes Prevention Evaluation. *Diabetes Care* 1996; 19(11): 1225–8.
- (xviii) The Cholesterol and Recurrent Events (CARE) trial. Rationale and design of a secondary prevention trial of lowering normal plasma cholesterol levels after acute myocardial infarction. *Am J Cardiol* 1991; 68(15): 1436–46.

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- (xix) The Diabetes Control and Complications Trial. Defining the relationship between plasma glucose and HbA_{1c}: analysis of glucose profiles and HbA_{1c} in the Diabetes Control and Complications Trial. *Diabetes Care* 2002; 25(2): 275–8.
- (xx) Kumamoto Study. Long-term results of the Kumamoto Study on optimal diabetes control in type 2 diabetic patients. *Diabetes Care* 2000; 23 (Suppl. 2): B21–9.
- (xxi) The DAIS Project Group. The Diabetes Atherosclerosis Intervention Study (DAIS): a study conducted in cooperation with the World Health Organization. *Diabetologia* 1996; 39(12): 1655–61.
- (xxii) DIGAMI (Diabetes Mellitus, Insulin Glucose Infusion in Acute Myocardial Infarction) Study Group. Prospective randomised study of intensive insulin treatment on long term survival after acute myocardial infarction in patients with diabetes mellitus. *BMJ* 1997; 314(7093): 1512–5.
- (xxiii) The Da Qing IGT and Diabetes Study. Effects of diet and exercise in preventing NIDDM in people with impaired glucose tolerance. *Diabetes Care* 1997; 20(4): 537–44.
- (xxiv) The Da Qing IGT and Diabetes Study. Impaired glucose tolerance and its relationship to ECG-indicated coronary heart disease and risk factors among Chinese. *Diabetes Care* 1993; 16(1): 150–6.
- (xxv) The Finnish Diabetes Prevention Study. *Br J Nutr* 2000; 83 (Suppl. 1): S137–42.
- (xxvi) The Study to Prevent Non-Insulin-Dependent Diabetes Mellitus. The STOP-NIDDM Trial: an international study on the efficacy of an alpha-glucosidase inhibitor to prevent type 2 diabetes in a population with impaired glucose tolerance: rationale, design, and preliminary screening data. *Diabetes Care* 1998; 21(10): 1720–5.
- (xxvii) TRIPOD (Troglitazone In the Prevention Of Diabetes): a randomised, placebo-controlled trial of troglitazone in women with prior gestational diabetes mellitus. *Control Clin Trials* 1998; 19(2): 217–31.
- (xxviii) The HOPE (Heart Outcomes Prevention Evaluation) study investigators. The HOPE Study: the design of a large, simple randomised trial of an angiotensin-converting enzyme inhibitor (ramipril) and vitamin E in patients at high risk of cardiovascular events. *Can J Cardiol* 1996; 12(2): 127–37.

Many countries in the region have national guidelines that can be accessed via the individual IDR-WPR member associations (see Appendix I).

Appendices

Appendix III

Aetiological classification of disorders of glycaemia*

Type 1	(beta-cell destruction, usually leading to absolute insulin deficiency) Autoimmune Idiopathic
Type 2	(may range from predominantly insulin resistance with relative insulin deficiency to a predominantly secretory defect with or without insulin resistance)
Other specific types	Genetic defects of beta-cell function Genetic defects in insulin action Diseases of the exocrine pancreas Endocrinopathies Drug- or chemical-induced Infections Uncommon forms of immune-mediated diabetes Other genetic syndromes sometimes associated with diabetes
Gestational diabetes**	

* As additional subtypes are discovered, it is anticipated that they will be reclassified within their own specific category.

** Includes the former categories of gestational IGT and gestational diabetes.

Source – WHO Consultation Report: Definition, Diagnosis and Classification of Diabetes Mellitus and its Complications, 1999.

Appendices

Appendix IV

Disorders of glycaemia: aetiological types and clinical stages

Stages	Normoglycaemia	Hyperglycaemia			
	Normal glucose tolerance	IGT and/or IFG	Diabetes mellitus		
Types			Not insulin requiring	Insulin requiring for control	Insulin requiring for survival
Type 1 Autoimmune Idiopathic			→		
Type 2* Predominantly insulin resistance Predominantly insulin secretory defects			→		
Other specific types*			→		
Gestational diabetes*			→		

* In rare instances, patients in these categories (e.g. Vacor toxicity, type 1 present in pregnancy) may require insulin for survival.

Source – WHO Report on Diagnosis and Classification of Diabetes Mellitus (1998).

Appendices

Appendix V

Conversion factors between conventional and SI units

This list is included to assist the reader to convert values between conventional units and the newer SI units (Système Internationale d'Unités) that have been mandated by many journals.

Analyte	Conventional units	SI units	Conventional to SI units	SI to conventional units
Plasma glucose	mg/dl	mmol/L	0.0555	18.02
Total cholesterol	mg/dl	mmol/L	0.0259	38.61
HDL cholesterol	mg/dl	mmol/L	0.0259	38.61
Triglycerides	mg/dl	mmol/L	0.0113	88.5