IMPORTANCE OF NUTRITION AND ADJUSTING INSULIN DOSES BEFORE AND DURING PREGNANCY IN WOMEN WITH TYPE 1 DIABETES: CASE REPORT

Magdalena Pisačić¹, Tomislav Ognjenčić¹, Dunja Degmenčić^{1,2}, Tatjana Bačun^{1,3}

¹Faculty of Medicine of Josip Juraj Strossmayer University of Osijek, Josipa Huttlera 4, 31000 Osijek, Hrvatska ²University Hospital Center Osijek, Department of Integrative Psychiatry, Clinic of Psychiatry, Josipa Huttlera 4,31000 Osijek, Hrvatska

³University Hospital Center Osijek, Department of Endocrinology, Clinic of Internal Medicine, Josipa Huttlera 4, 31000 Osijek, Hrvatska

pisacicmag@gmail.com

Abstract

In women with type 1 diabetes, it is important to achieve proper glycemic values before pregnancy and to use medications that are allowed in pregnancy. Case covers 35 year old woman who was diagnosed with type 1 diabetes in childhood. The patient is on intensive insulin therapy which consists of shortacting insulin-aspart with three main meals (15 g carbohydrates: 1.5 U at breakfast, 1 U at lunch and 1 U at dinner) and long-acting insulin degludek at 10 pm. She was admitted to the Endocrinology Department with fluctuating glycemic values, with hypoglycemia in the afternoon and at night (HbA1c 8.7%), to regulate blood glucose as part of pregnancy planning. Further education on a regular balanced diet was conducted, the dose of aspart-insulin corrected depending on blood glucose and carbohydrate units in the meal (15 g carbohydrates: 1U at breakfast, 0.75U at lunch and 0.75U at dinner), and continuous glucose measurements is introduced. After 4 months, control HbA1c was 6.9%. Because of pregnancy planning, degludec-insulin was replaced with detemir-insulin, at two daily doses. She had nausea during her pregnancy, ate more fruits and carbohydrates and, accordingly, increased dose of aspart-insulin was applied with meals (now up to 2: 2: 2 U with main daily meals). At week 28 of pregnancy, blood glucose was 5.0-5.7 mmol / l, glucose and ketones in the urine were normal, HbA1c 6.2% and had no symptoms of hypoglycemia. It is very important to achieve proper glycemic values prior and during pregnancy. Additional education is being conducted on a regular balanced diet, self-control or continuous measurement of blood glucose, adjusting the dose of short-acting insulin to glycemic values and carbohydrate units in the meal and correcting the basal insulin dose, as well as the importance of physical activity.

Key words: type 1 diabetes, insulin therapy, hypoglycemia, pregnancy and self-monitoring blood glucose

SASTOJCI IZ HRANE I DODATAKA PREHRANI U PODRŠCI LIJEČENJU ZNAČAJNIJIH BOLESTI KOŽE

Midhat Jasic¹, Lejla Bedak¹, Ivan Vukoja², Emilija Spasesa Aleksovska³, Sljivic Mirsad⁴, Nejra Hodzic¹, Marizela Sabanovic¹

¹ Farmacutski fakultet Univerziteta u Tuzli, Bosna i Hercegovina
² Opća županijska bolnica Požega, Hrvatska
³ ZADA Pharmaceutical doo Tuzla, Bosna i Hercegovina
⁴ JZU Dom zdravlja Živinice, Bosna i Hercegovina

Sažetak

Uvod: Stalna izloženost stresu, neprimjerena prehrana uz nedostatak esencijalnih nutrijenata i protektivnih sastojaka, te unos rafiniranih vrsta hrane mogu se odražavati na zdravlje i izgled kože. Zbog toga je u podršci liječenju nekih bolesti kože značajno preporučiti način prehrane kao i upotrebu dodataka prehrani.

Cilj i metode rada rada: Cilj rada je bio prikupiti i analizirati stručne i znanstvene informacije vezane za prehranu i dodatke prehrani koji se mogu koristiti kod najčešćih bolesti kože.