

THINK TWICE WHEN YOUR DIABETIC PATIENT SAYS HE / SHE IS FINE: CURRENT DIABETES SUBJECTIVE VS. OBJECTIVE GLUCOSE CONTROL AND GASTROINTESTINAL SYMPTOMS IN ADULT OUTPATIENT DIABETIC PATIENTS**J. Peceliuniene¹**, I. Zukauskaitė², A. Stapulionyte³, J. Kucinskaite³¹*Clinic of Internal Diseases, Family Medicine and Oncology, Vilnius University Faculty of Medicine, Lithuania*²*Faculty of Philosophy, Vilnius University, Lithuania*³*Faculty of Medicine, Vilnius University, Lithuania*

The aim of the study was to determine the relationship between subjective and objective current diabetes mellitus (DM) control, and gastrointestinal (GI) symptoms in adult outpatient diabetic patients (AODP). **Methods:** AODP were asked about current subjective glucose control (CSGC) and GI symptoms. Current fasting plasma glucose (CFPG) was evaluated; current GI preparations were registered from medical records. Three groups were selected: the 1st – patients with “poor” CSGC and elevated CFPG (7mmol/L) - P/EGlu, the 2nd–“good”CSGC patients with elevated CFPG - G/EGlu, and the 3rd–those with “good” CSGC and good controlled DM (CFPG \leq 7mmol/L) - G/GGlu. For comparison of groups chi-square test applied. **Results:** Of 59 AODP there were 23 (39%) males and 36 (61%) females. There were 26 (44%) patients in P/EGlu group, 12 (20%) in G/EGlu group and 21 (36%) in G/GGlu group. General GI symptoms significantly more reported in the G/GGlu group - 81.0% vs. 34.6% P/EGlu and 41.7% G/EGlu groups ($p=0.017$). More frequent defecation reported in P/EGlu group – 30.8% vs. 16.7% G/EGlu vs. 4.8% G/GGlu groups ($p=0.041$). Well cleaned stool were more often in G/GGlu group – 61.9% vs. 23.1% in P/EGlu vs. 33.3% in G/EGlu groups ($p=0.042$). Digestive supplements were significantly more consumed by P/EGlu patients–80.8% vs. 58.3% G/EGlu vs. 23.8% G/GGlu groups ($p0.001$). **Conclusion:** Good CSGC does not fit the objective results in 20% of AODP. More than 80% of P/EGlu patients use digestive supplements, however, more G/Glu patients have general GI symptoms - this phenomenon needs further evaluation, including polypharmacotherapy in AODP.

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