ABSTRACTS: POSTER PRESENTATIONS

Poster 01

Chronic pain in primary care attenders: Severity and level of expressed need
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Background: Chronic pain is an important healthcare problem in primary care but the severity of pain and needs have not been well researched.

Objectives: To determine chronic pain grade (CPG) and the level of expressed need (LEN) in chronic pain sufferers.

Methods: This is a sub-analysis of a cross-sectional study on the prevalence of chronic pain. A random sample of patients aged 21 years and above attending a university-based primary care clinic was screened for chronic pain using self-administered case screening questionnaires. Patients identified with chronic pain were then interviewed face-to-face to assess chronic pain grade and level of expressed needs using CPG and LEN questionnaires. CPG Questionnaire has seven-items that measures severity of chronic pain in persistence, intensity and disability and is classified into grades 0-I V (grade 0, no pain; grade IV, most severe pain). LEN Questionnaire has four questions that measures patients' response to chronic pain and health care utilization. It was categorized into levels 0-4 (level 0, no need; level 4, highest level of need).

Results: 490 patients were approached, 465 consented (95% response rate). The prevalence of chronic pain was 54.8% (n=255). Mean age of chronic pain sufferers was 53.3±13.6 years. Among the chronic pain sufferers, 89 (34.9%) had grade I pain, 81 (31.8%) grade 2, 56 (22.0%) grade 3 and 29 (11.4%) grade 4 pain. For LEN, 57 (22.4%) showed no expressed need, 78 (30.6%) had level 1 need, 61 (23.9%) level 2, 34 (13.3%) level 3 and 25 (9.8%) level 4 need. There were significant associations found between grades of chronic pain and age (F=3.819, p<0.011), and occupation categories (X²=26.093, df=15, p=0.037). Significant association were also found between levels of expressed need and age (F=2.992, p<0.019).

Conclusions: There are obvious unmet needs among chronic pain sufferers and measures are needed to address this issue.

Poster 02

Prevalence of chronic kidney disease and its associated factors in patients with type 2 diabetes mellitus
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Background: Diabetes is the leading cause of chronic kidney disease. However, it remains under-diagnosed in the diabetic population.

Objectives: To determine the prevalence of chronic kidney disease (CKD) in patients with type 2 diabetes mellitus (T2DM) and to determine its associated risk factors.

Methods: A cross-sectional study was conducted over an eight-week period at a primary care clinic in Seremban, Malaysia. All adult patients with T2DM attending the clinic were invited to participate and a face-to-face interview was done using structured questionnaire consisting of data on socio-demography and clinical characteristics. Clinical parameters were retrieved from medical records. The estimated glomerular filtration rate (eGFR) was calculated using the Cockcroft-Gault equation to determine the prevalence of CKD.

Results: A total of 376 patients with T2DM participated. Response rate was 97.4%. The prevalence of CKD in patients with T2DM was 41.5%. There were 137 (87.8%) patients with CKD who had a normal range of serum creatinine. A significant association was found between age, duration of diabetes, hypertension, a positive family history of kidney disease, higher BMI, central obesity, serum creatinine, HbAlc level and CKD. Medications used such as biguanides, angiotensin converting enzyme inhibitors, diuretics and alpha blockers were also significantly associated with CKD. Using logistic regression, significant predictors for CKD were age, serum creatinine, central obesity and BMI.

Conclusion: Nearly half of the patients with T2DM had CKD. Most patients with CKD had a normal range of serum creatinine. It is therefore important to assess the eGFR for CKD status in clinical practice than dependence on serum creatinine level alone.