It was suggested that Irbesartan can attenuate high glucose induced NOX4 gene (1.4±0.6-fold; suppressed by Irbesartan in time-dependent manner (P<0.05), and protein (1.8±0.5-fold; P<0.05) expression; (3) Irbesartan reduced eNOS gene (2.1±0.8-fold; P<0.05), and protein (2.8±0.7-fold; P<0.05) expression. Conclusions: It was suggested that Irbesartan can attenuate high glucose induced EMP release in HCAEC. This effect of Irbesartan was partly related to the inhibition of oxidative stress response, which may be mediated by the activation of NOX4.

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DB000537
Prevalence of the glycometabolic abnormality among community residents aged 40–79 years in Chengdu
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Objective: To estimate the prevalence of glycometabolic abnormality among community residents aged 40–79 years in Chengdu. Design and methods: A cross-sectional population survey for glycometabolic abnormality using randomly cluster-sampling was performed in 2008. Questionnaire and 75 gram oral glucose tolerance test (OGTT) were conducted in 5495 subjects, and serum lipid-profile, uric acid as well as height, weight, blood pressure were measured. Results: The average fasting blood glucose was 5.6±0.0 mmol/L. The average OGTT 2 hour blood glucose was 7.9±0.1 mmol/L, they were increased with aging. Prevalence of diabetes mellitus, impaired fasting glucose (IFG) and impaired glucose tolerance (IGT) were 16.1%, 2.5% and 20.1%, respectively. The prevalence of glycometabolic abnormality increased with aging; prevalence of diabetes mellitus in city community, urban–rural fringe community and rural community were 21.4%, 17.7% and 11.1%, respectively. The prevalence of glycometabolic abnormality has no differences between sexes. The prevalence of diabetes and IGT increased with aging. But the prevalence of IFG have no obvious relationship with age. Conclusions: Our results showed that the glycometabolic abnormality are highly prevalent in Chengdu residents; over half of them are undiagnosed diabetes, they need to be find out as soon as possible. The prevalence of diabetes increased with aging.


DB000857
Relationship between the cardiovascular disease, kidney disease, retinopathy and blood pressure, lipids disorder, blood glucose level in the Chinese diabetic patients
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Objective: To analyze the impact of blood systolic–diastolic-pressure (SBP, DBP) increase, lipids disorder, and blood glucose level on the main diabetic complications, cardiovascular (CVD), kidney disease (DN) and retinopathy (DR) in the Chinese diabetic patients. Patients and methods: 9258 diabetic patients (male 5158 and female 4100), age 55.1±11.7 years, diabetes duration 1–480 months; BMI 25.8±3.4 kg/m², were divided into different groups based on their blood pressure level (grouped on every 20 mmHg SBP from 90 to 230 mmHg and 10 mmHg or 20 mmHg DBP from 60 to 120 mmHg ), the blood lipids and glucose level (quartile). Cardiovascular disease, kidney diseases and diabetic retinopathy were compared and analyzed. Results: Blood pressure increased significantly with aging and longer duration of diabetes. The prevalence of CVD, DN and DR were significantly higher in this group with higher SBP or DBP. There were higher prevalence of CVD in the patients with TC level 5.0–5.72 mmol/L and >5.72 mmol/L than those with TC <5.0 mmol/L, higher CVD, DN, DR prevalence in the patients with HbA1c >6.5% than those with HbA1c <6.5%. Multiple regression analysis showed SBP and DBP were the risk factors of the DN, DR and CVD. Conclusions: Hypertension aggravates the diabetic macro-and micro-vascular complication.


Educational Programs
ED000028
Self-learning interactive computer package on hypertension
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Introduction: Though students spend most of their time in class room learning, they learn much by self-learning. Self-learning often depends on the learning materials that are available to them. Many students prefer lecture notes (1). Students read the handout as they are not sure about the sources of information that they need to