

OBJECTIVES: To determine the proportion of specific cardiovascular risk factors in ambulatory patients with type 2 diabetes and the levels of control achieved in them. DESIGN: Prospective, cross-sectional study over a six month period. SETTING: Out-patient diabetic clinic of the Kenyatta National Hospital. SUBJECTS: Two hundred and eleven patients with type 2 diabetes. MAIN OUTCOME MEASURES: Sociodemographic attributes, duration of diabetes, levels of glycaemia, body weight, blood pressure, fasting lipids and modes of treatment. RESULTS: A total of 211 patients were enrolled, 57.3% were females. The mean (SD) age for women was 54.45 (9.44) and that of men was 55.8 (9.02) years. About 77% of the study population were on oral glucose-lowering agents with or without insulin but less than 30% achieved HbA1c < 7%; 15% were active cigarette smokers; about 50% were hypertensive with female predominance but 65% of them did not achieve desired blood pressure level inspite of treatment. Just over 50% had raised LDL-cholesterol and over 75% had raised total cholesterol but only three men were on statins without achieving desired targets. Body mass index above 30 kg/m2 as a measure obesity was found in 32% of females and 16% males. Most of the study patients admitted use of Aspirin at certain times in the course of their diabetes. CONCLUSION: The study showed that specific cardiovascular risk factors of hyperglycaemia, dyslipidaemia, hypertension and obesity were prevalent although not adequately controlled to targets. Statin use was extremely low in people who already needed them. Regular Aspirin use was infrequent because many patients did not quite understand its role in their diabetes treatment. It is recommended that a more pro-active approach in multifactorial address of cardiovascular risk factors be used in high-risk patients with type 2 diabetes to forestall future cardiovascular events.