



ISSN: 0975-833X

Available online at <http://www.journalcra.com>

INTERNATIONAL JOURNAL  
OF CURRENT RESEARCH

International Journal of Current Research

Vol. 16, Issue, 12, pp. 30793-30794, December, 2024  
DOI: <https://doi.org/10.24941/ijcr.47708.12.2024>

## RESEARCH ARTICLE

### DIABETIC AGE AND SATIETY TIME CORRELATION

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#### ARTICLE INFO

##### Article History:

Received 14<sup>th</sup> September, 2024  
Received in revised form  
27<sup>th</sup> October, 2024  
Accepted 20<sup>th</sup> November, 2024  
Published online 30<sup>th</sup> December, 2024

##### Key Words:

Fasting Glucose,  
Satiety Glucose,  
Patients Satiety,  
Diabetic Patients.

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#### ABSTRACT

**Aim:** Patient's diabetic age effect to satiety time. **Introduction:** Diabetes is a chronic disease that occurs either when the pancreas does not produce enough insulin or when the body cannot effectively use the insulin it produces. In 2014, 8.5% of adults aged 18 years and older had diabetes. All of colleagues follow up diabetic patients with fasting glucose, HbA1c and satiety glucose. Diabetic satiety time is important. Because; if the patients satiety time isn't same despite of their intake calories aren't same. It can effect caloric intake to analyze diabetic regulation. **Material-Method:** Our study began 2015-2016 to 492 patients type 2 dm, three months for follow up, to be aware of self satiety time, correlations between diabetic time and satiety time. 164 patients, Grup A(0-5 years); 164 patients Grup B (5-10 years); 164 patients, Grup C(10-15 years) are included to this study P 0.05 was accepted as statistically significant. Data were analyzed in the SPSS statistical package program (Version 17, USA) by chi square test. **Result:** Group A and B have statistically meaningful correlation between but grup A and grup C and group C and group B statistically meaningful about diabetic time and satiety time (p0, 001). **Conclusion:** Satiety time measurement isn't verifiable for subjectivity. Diabetic age and satiety time correlations is important for regulation of diabetes. For this reason; satiety time could use for follow up measurement or should be considered this result for analyzed patient of satiety glucose level. It can also be used to predict the time before diagnosis of diabetes.

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Citation: Abdülkadir Geylani Şahan and Kıymet Tuna. 2024. "Diabetic age and satiety time correlation." *International Journal of Current Research*, 16, (12), 30793-30794.

## INTRODUCTION

Diabetes is a chronic disease that occurs either when the pancreas does not produce enough insulin or when the body cannot effectively use the insulin it produces. Insulin is a hormone that regulates blood sugar. (2) Hyperglycaemia, or raised blood sugar, is a common effect of uncontrolled diabetes and over time leads to serious damage to many of the body's systems, especially the nerves and blood vessels. (2) Diabetic complications is caused day by day. All of colleagues follow up diabetic patients with fasting glucose, HbA1c and satiety glucose but it is the question; are the patients satiety time is same or their intake calories are same or not. Do the satiety times of diabetic patients change over time? Questions such as whether measures should be taken to increase the duration of the meal in order to reduce the calories consumed become important. Because approximately two million deaths annually occur due to complications related to high blood sugar. (1) All of colleagues follow up diabetic patients with fasting glucose, HbA1c and satiety glucose. Diabetic satiety time is important. Because; if the patients satiety time isn't same despite of their intake calories aren't same. It can effect caloric intake to analyze diabetic regulation.

## MATERIALS AND METHOD

Our study began 2015-2016 to 492 patients type 2 dm, three months for follow up, to be aware of self satiety time, correlations between diabetic time and satiety time. 164 patients, Our study began 2015-2016 to 680 patients type 2 dm, three months for follow up, to be aware of self satiety time, correlations between diabetic time and satiety time. 112 patients, Grup A(0-5 years); 123 patients Grup B(5-10 years); 85 patients Grup C(10-15 years) are included to this study. P 0.05 was accepted as statistically significant. Data were analyzed in the SPSS statistical package program (Version 17, USA) by chi square test.

## RESULT

Group A and B have statistically meaningful correlation between but grup A and grup C and group C and group B statistically meaningful about diabetic time and satiety time (p=0,001). We ask patients to eating time their eating time mean value measured and saved meal time data; corrected data from the others visit (after three months) Grup A and B and C's sex, age differences are not statistical meaningful.

**Table 1. In terms of time, the values of those who did not use insulin and those who used insulin statistically meaningful ( $p < 0,05$ )**

TIME		N	Mean	Std. Deviation	Median	Minimum	Maximum	p
insulin	no	116	5,34	5,10	4,00	0,00	25,00	0,001**
	yes	48	12,96	7,64	13,00	1,00	38,00	
	Total	164	7,57	6,87	5,50	0,00	38,00	
oad	no	43	6,74	7,34	4,00	0,00	25,00	0,359
	yes	121	7,87	6,70	6,00	0,00	38,00	
	Total	164	7,57	6,87	5,50	0,00	38,00	
x15	No	134	7,49	6,77	5,50	0,00	38,00	0,730
	Yes	30	7,97	7,42	5,50	0,00	25,00	
	Total	164	7,57	6,87	5,50	0,00	38,00	
x30	No	110	7,51	6,70	5,00	0,00	38,00	0,865
	Yes	54	7,70	7,26	6,00	0,00	35,00	
	Total	164	7,57	6,87	5,50	0,00	38,00	
x60	No	85	7,76	7,24	6,00	0,00	35,00	0,712
	Yes	79	7,37	6,49	5,00	0,00	38,00	
	Total	164	7,57	6,87	5,50	0,00	38,00	

Grup A and grup B medical therapy are not statistically meaningful but grup C statistically meaningful more insulin therapy user are included. ( $p < 0,05$ ) The difference between the three groups is statistically significant ( $p < 0,05$ ).

## CONCLUSION

Satiety time measurement isn't verifiable for subjectivity. Diabetic age and satiety time correlations is important for regulation of diabetes. For this reason; satiety time could use for follow up measurement or should be considered this result for analyzed patient of satiety glucose level.

It can also be used to predict the time before diagnosis of diabetes.

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