

RESULTS

A total of 602 adults with T2D were analysed. The overall median time to SGLT2i discontinuation was 40.5 months (95%CI [34.6, 54.0]). Adults with T2D who were on empagliflozin (vs. dapagliflozin; $P = 0.041$) and concomitant DPP4 inhibitors ($P = 0.028$) had significantly longer treatment persistence. Additionally, adults with baseline eGFR <60 ml/min/1.73 m² discontinued SGLT2i earlier than those with baseline eGFR ≥ 60 ml/min/1.73 m² ($p = 0.002$). The overall treatment persistence rates at 6 months, 1 year, 3 years and 5 years were 78.0%, 68.2%, 49.4% and 42.6%, respectively. The top 3 reasons for SGLT2i discontinuation were as follows: 1) high pill burden and nonadherence (15.8%); 2) a decline in eGFR and acute kidney injury (10.3%); and 3) financial constraints (8.4%).

CONCLUSION

This study provides valuable insights into the time to SGLT2i discontinuation in adults with T2D at an urban academic institution. As SGLT2i are the GDMT for CKM syndrome, the underlying factors behind unwarranted SGLT2i discontinuation should be explored to facilitate more personalized diabetes management to optimize health outcomes.

EP_A059**THE IMPACT OF LIFESTYLE MODIFICATION ON METABOLIC SYNDROME AMONG MOH STAFF**

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Gunavathy Muthusamy,¹ Tee Bee Ting,¹ Mok Meng Loong,¹ Abd Jalil bin Abd Aziz,¹ Renuga K Raman,² Siti Ramlah binti Rasimun,³ Lee Chai Hua,³ Ummi Fatiah Hanim binti Bahaman,¹ Bay Shing Shen¹

¹Department of Medicine, Hospital Shah Alam, Malaysia

²Occupational Safety Unit, Hospital Shah Alam, Malaysia

³Department of Dietetics and Food Service, Hospital Shah Alam, Malaysia

INTRODUCTION/BACKGROUND

Metabolic syndrome (MetS) represents a pressing global public health concern, marked by a constellation of metabolic irregularities such as elevated blood pressure, dyslipidaemia, elevated fasting blood glucose and central obesity, heightening the risk for type 2 diabetes mellitus and cardiovascular disease. Despite evidence endorsing lifestyle interventions, local data on their effectiveness in Malaysia are scarce.

METHODOLOGY

This study explores the impact of lifestyle modifications on MetS among Ministry of Health (MOH) staff at Hospital Shah Alam (HSAS) to guide policy-level interventions for improved public health outcomes. Using data from KOSPEN 2020 at HSAS, this cohort study focused on lifestyle modifications from July 2021 to July 2022, comprising four arms: the diet group, exercise group, exercise + diet group, and control group. Due to challenges with recruitment and adherence, the sample size was limited, and the follow-up period was abbreviated.

RESULTS

With 36 participants recruited (30.6% males, 69.4% females; mean age: 40.28 years), no significant differences in key parameters were noted at 3 and 6 months. However, during the 9-month reassessment, the diet group demonstrated a significant mean reduction in SBP ($P = 0.005$). On the other hand, the diet + exercise group exhibited decreased FBS compared to the diet ($P = 0.037$) and control groups ($P < 0.001$).

CONCLUSION

Despite constrained statistical significance likely attributed to high dropout rates and adherence issues, dietary control, exercise, or their combination indicate efficacy in managing MetS. Further methodically structured research is imperative to deepen our comprehension of these relationships.

EP_A060**EAST COAST ENDOCRINE TERTIARY CENTRE EXPERIENCE WITH GLUCAGON-LIKE PEPTIDE-1 (GLP-1) RECEPTOR AGONISTS**

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Aina Mardiah Z, Wan Nur Hidayah WY, Goh Hui Hua, Raja Nurul Azafirah RAS, Siti Sanaa WA, Masliza Hanuni MA

Endocrine Unit, Department of Medicine, Hospital Sultanah Nur Zahirah, Kuala Terengganu, Malaysia

INTRODUCTION/BACKGROUND

GLP1-RA is licensed for the treatment of Type 2 Diabetes Mellitus (DM) and weight reduction in obese patients. These agents have been proven effective without increased risk of hypoglycaemia and with significant weight reduction benefits.

METHODOLOGY

This retrospective cohort study aims to determine the clinical outcome of Type 2 DM and obese patients started on