

Adult E-Poster

RESULT

Thirty patients were included with predominant male (56.7%) and Malay ethnicity (90%) and median age of 54 years. Majority had underlying T2DM (93.3%) and presented with sepsis (96.7%). The median length of hospital stay was 5.5 days. 33.3% of patients had severe DKA, but only 30% were managed in an ICU/HDW setting. All patients were treated according to standardized guidelines and had resolution of DKA within 24 hours. Only (55.5%) of patients were assessed by diabetes educators before discharge. Majority of patients had a well-documented discharge plan, but only (70%) had follow-up care arranged within the hospital.

CONCLUSION

The audit revealed good adherence to standardized DKA management protocols. However, there is room for improvement in the prioritization of severe DKA cases for ICU/HDW admission. The importance of diabetes educators in the post-recovery phase of DKA should be better recognized, and follow-up care process needs to be enhanced.

EP_A181

DIABETES EDUCATOR STATUS AND WELL-BEING STUDY IN PAHANG

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INTRODUCTION

Diabetes educators (DEs) are essential in shared decision-making for diabetes care. Psychological and social factors influence their well-being, motivation, and efficiency in delivering care.

METHODOLOGY

This is a cross-sectional study conducted from June to November 2024, involving DEs in Pahang using the QPS Nordic questionnaire. Responses were measured on a Likert scale (1: Very Seldom/Never to 5: Very Often/Always), assessing job demands, role clarity, role conflict, job predictability, mastery perception, leadership support, social climate, work-life balance, and motivation.

RESULT

Seventy-five DEs participated in the study (mean age: 39.3 years, SD: 5.5). Fifty-seven percent were hospital-based (80% in wards, 20% in clinics), and 43% worked in primary care. 65% had over five years of experience. The respondents had a neutral view of their quantitative job

demands (Mean score: 3.09) and had good role clarity in their institution (Mean score: 3.96). However, they faced significant conflict in completing their responsibilities and inadequate resources in their daily work. Job predictability was perceived as neutral in both short-term and long-term aspects. Most respondents were positive about their work quality and were satisfied with their ability to complete tasks. The respondents viewed their immediate superiors positively, particularly in listening to their work-related problems. Despite this, the respondents had a neutral view on superiors' empowering leadership or creating space to voice opinions. Respondents felt there was no job interference with their personal life (Mean score: 2.71). They were highly motivated to achieve success, recognition, and security in their careers, with a focus on a peaceful and healthy working environment.

CONCLUSION

Diabetes educators in this study demonstrated high motivation to excel in their profession but faced significant difficulties in fulfilling their roles. Emphasizing empowering leadership and fostering a supportive work environment are crucial to improving diabetes educators' motivation, learning, and efficiency.

EP_A182

A RETROSPECTIVE REVIEW OF ADRENAL INCIDENTALOMAS IN MALAYSIA: CLINICAL CHARACTERISTICS AND NATURAL HISTORY

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INTRODUCTION/BACKGROUND

Adrenal incidentalomas (AI) are frequently detected during imaging for unrelated conditions, with the majority being benign and non-functional. Numerous studies on AIs have been conducted in the Western countries but there is a lack of data from this region.

METHODOLOGY

This retrospective study aimed to describe the clinical and radiological characteristics, as well as the natural history of AIs in a Malaysian cohort. Medical records of 251 AI patients from three tertiary hospitals were reviewed. Baseline demographic data, imaging characteristics, hormonal evaluations and histopathological findings were collected. Follow-up data on serial imaging, hormonal re-evaluations and eventual outcome were captured.

Adult E-Poster

RESULT

The median age of the cohort was 58 years, with almost equal gender distribution and most tumors being non-malignant (92%) and non-functioning (72%).

Bilateral AIs were present in 24 (9.6%) patients. Ten were functioning with mild autonomous cortisol secretion (MACS) being the commonest subtype (80%).

Among the non-malignant AIs, 27% were functioning. Of these, the majority (51%) were diagnosed with MACS, followed by pheochromocytoma (27%), primary hyperaldosteronism (21%), and one case of overt Cushing's syndrome. Functioning AIs were associated with higher rates of hypertension and osteoporosis, larger tumour size, greater tumour density, and a lower rate of absolute contrast washout.

Adrenalectomy was performed more frequently in the functioning group, primarily for MACS and pheochromocytoma. The majority (94%) of non-functioning benign AIs were managed conservatively. No malignant transformation was observed, and only one case became functional over a median follow-up of 30 months.

Of the 20 malignant AIs, 12 were primary adrenal cancers. The malignant AIs were more likely to present with weight loss, overt Cushing's, larger tumor size, higher density, reduced contrast washout, and significantly higher mortality compared to non-malignant AIs.

CONCLUSION

This study suggests that most benign non-functioning AIs pose minimal risk of progression, supporting reduced follow-up in stable cases.

EP_A183

INSIGHTS FROM A 2024 CLINICAL AUDIT OF THYROID STORM CASES AT HOSPITAL SULTAN ISMAIL, JOHOR BAHRU

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INTRODUCTION/BACKGROUND

Thyroid storms require immediate medical intervention due to the risk of rapid multi-organ failure and high mortality. Therefore, a retrospective audit of thyroid storm

management at Hospital Sultan Ismail, Johor Bahru (HSIJB) was done, to ascertain strengths and identify areas for improvement.

METHODOLOGY

This audit analyzed all 17 thyroid storm cases admitted to HSIJB in 2024 (1st January 2024 to 31st December 2024). Data was extracted from electronic medical records.

RESULT

Most were female (70%, n = 12) with mean age of 48 years (range 26 to 75 years). All had Bursch-Wartofsky Point Scale of at least 45 (range 45 to 140). The commonest presentation was cardiovascular manifestations (100% tachycardia, 76% atrial fibrillation, 58% heart failure), followed by gastrointestinal-hepatic dysfunction (53%) and CNS effects (47%). All 5 ventilated patients were co-managed in the ICU. Predominant etiology was Graves' disease (88%, n = 15), with a case of gestational trophoblastic disease. Main precipitants were medication non-adherence (50%, n = 8), infection (23%, n = 4), and new thyroid diagnosis (29%, n = 5). Treatment was initiated within 6 hours of presentation in 82% of cases (n = 14). In the remaining 3 cases, treatment was delayed by up to 9 hours while awaiting TFT results, as these patients had no prior history of thyrotoxicosis. Aside from one death within 3 days due to thyroid storm and tubo-ovarian abscess, there was no other mortality at up to 180 days after discharge.

CONCLUSION

Timely intervention in thyroid storms is critical to optimize patient outcomes. However, diagnosis can be challenging, particularly in patients without known thyroid disorders, which may result in delayed treatment. As such, it is essential to initiate therapy promptly based on strong clinical suspicion, even prior to laboratory results. Additionally, addressing issues related to treatment non-adherence through targeted patient education is vital to reduce the incidence of thyroid storm.