

Adult E-Poster

CONCLUSION

Our findings imply that PwD already on SGLT2 inhibitors, those with better glycaemic control and milder proteinuria at baseline are more likely to persist with their GLP-1 RA therapy. Further research incorporating mixed-model analyses and patient perspectives is needed to elucidate the underlying reasons for these associations.

EP_A205

REASSESSING CARBIMAZOLE DOSING STRATEGIES: ASSOCIATION BETWEEN INITIAL DOSE AND SIX-WEEK THYROID FUNCTION

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INTRODUCTION

Carbimazole is a commonly used antithyroid medication for the treatment of hyperthyroidism. Dosage recommendations typically vary based on the severity of biochemical hyperthyroidism, particularly free thyroxine (FT4) levels. However, real-world dosing practices may deviate from guideline-based recommendations, potentially leading to suboptimal outcomes such as persistent hyperthyroidism or iatrogenic hypothyroidism. This study evaluates whether adherence to recommended dosing based on initial FT4 levels is associated with appropriate thyroid function outcomes at six weeks.

METHODOLOGY

We conducted a retrospective observational study involving 125 patients with confirmed hyperthyroidism. Patients were categorized based on whether their initial carbimazole dose was lower than, consistent with, or higher than the recommendations outlined in the American Thyroid

Association guidelines, as determined by their initial FT4 levels. Thyroid function outcomes at 6 weeks were classified as euthyroid, hypothyroid, or persistent hyperthyroid based on repeat thyroid function tests. A chi-square test was performed to evaluate the association between dosing appropriateness and thyroid outcome.

RESULT

The mean age of participants was 48.9 years (SD = 15.0). Based on initial FT4 values, 23.2% were within 1–1.5× upper normal limit (UNL), 23.2% were 1.5–2× UNL, and 53.6% were >2× UNL. Among the 63 patients who received a correct dose, 58.6% became hypothyroid, and 35.0% became euthyroid. In contrast, 52.5% of those given a lower dose achieved euthyroidism, while only 17.2% became hypothyroid. Higher-than-recommended doses resulted in 24.1% hypothyroid outcomes. The chi-square test demonstrated a statistically significant association between dose category and thyroid outcome ($p = 0.003$).

CONCLUSION

Initial carbimazole dosing based on FT4 levels is significantly associated with short-term thyroid outcomes. Interestingly, lower-than-recommended doses were more likely to achieve euthyroidism without excessive hypothyroidism. These findings suggest the need to re-evaluate dosing strategies to optimize early treatment outcomes and reduce the risk of overtreatment in hyperthyroid patients.

EP_A206

A DESCRIPTIVE COST ANALYSIS OF HOSPITALISATIONS AT A DISTRICT HOSPITAL FOLLOWING INSULIN DISCONTINUATION

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INTRODUCTION

A nationwide shortage of human insulin in Ministry of Health (MOH) facilities has forced primary care clinicians