Abstract

Diabetes mellitus is a pathology that has widely spread throughout the world in the past decades. Postprandial hyperglycemia plays an important role in the progress of the disease due to the fact that increases the risk for cardiovascular events. This study’s aim was to determine if the use of intravenous metoclopramide in patients with Diabetes Mellitus increases the postprandial glycemia. Material and methods: A cohort of patients hospitalized with type 2 diabetes mellitus. Patients were classified as exposed (metoclopramide 10 mg IV) and not exposed, and glycemia preprandial and postprandial at 30, 60 and 120 minutes was measured. Results: There were 80 patients in each group, and in both groups the general characteristics were homogeneous. The postprandial glycemia in the exposed group was higher at 30, 60, 90 and 120 minutes, being only statistically significant at 120 minutes postprandial (p = < 0.001). Conclusions: In conclusion, the use of intravenous metoclopramide is a risk factor to develop postprandial hyperglycemia in diabetic patients.

Keywords

Postprandial hyperglycemia, Diabetes mellitus, Metoclopramida, Prokinetic.