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Glycaemic control, psychometric measures and demographics of a Young Adult population with Type 1 Diabetes and Body Dissatisfaction.

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Aim: To assess whether body dissatisfaction, identified by a 3 question tool within a Diabetes Psychosocial Assessment Tool (DPAT) is associated with poorer glycaemic control parameters, psychometric measures and being overweight, and leads to optimal dietetic follow up.

Methods:

Retrospective audit of clinic data collected from 2016-2019, including an annual DPAT filled out by young adults, containing three validated tools screening for diabetes distress (PAID), anxiety and depression (PHQ4), wellbeing (WHO5) and a body dissatisfaction tool asking the patients comfort with their Weight, Shape and Eating pattern (WSE). A score ≤ 2 (on a 5 point Likert scale) is considered a low WSE score, generating a dietitian referral. Referral outcomes were measured from 2018 with ongoing analysis.

Results:

Participants (n=245) included young adults (16-26 years) with T1DM (duration 10 ± 5 years), HbA1c of $8.7 \pm 1.6\%$ and BMI of $24.8 \pm 5.5 \text{ kg/m}^2$ with 60% using multiple daily injections and 40% insulin pump therapy. Half of the group were male (n=115, 47%).

Those with low WSE scores (n=96, 39%) were more likely to be female (n=66, 51% vs n=30, 26%, $p < 0.001$), overweight (n=50, 52% vs n=46, 28%, $p < 0.001$), have possible anxiety and depression (PHQ4) (n=42, 54% vs n=53 32%, $p = 0.001$) and poorer wellbeing (WHO5) (n=23, 24% vs n=73, 7.4%, $p < 0.001$). There was no difference in age, HbA1c, diabetes duration, insulin regime, diabetes distress (PAID), severe hypoglycaemia or diabetic ketoacidosis within last 2 years between those with a low WSE score and normal WSE score. Fifty-seven percent were followed up by a Dietitian and 75% of these were seen on the day of referral in a multi-disciplinary clinic.

Conclusions: This study shows that the body dissatisfaction tool is associated with strong risk factors for eating disorders and could be considered as an early screening measure for eating disorders. Future validation and improving access to a Dietitian is required.

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