

# Diabetic polyneuropathy not up with impaired glycemia

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"Prevalence of typical DPN, [retinopathy](#), and nephropathy was significantly increased only in subjects with new diabetes," the authors write. "For atypical DPN, such an increase was not observed even in subjects with new diabetes. In [medical practice](#), explanations other than IG should be sought for patients with atypical DPN (chronic idiopathic axonal polyneuropathy) who have IG."

**More information:** [Abstract](#)  
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(HealthDay) -- Although significantly increased in subjects with new diabetes, the rates of typical diabetic polyneuropathy (DPN), retinopathy, and nephropathy are not significantly different between subjects with and without impaired glycemia (IG), according to research published in the March issue of *Diabetes Care*.

Peter J. Dyck, M.D., of the Mayo Clinic in Rochester, Minn., and colleagues conducted a prospective, population-based survey of 150 subjects without IG, 174 with IG, and 218 with new diabetes to determine whether DPN, retinopathy, or nephropathy are more prevalent in subjects with IG than in healthy subjects.

The researchers found that the frequency of retinopathy and nephropathy was not significantly different between patients with and without IG, but was greater in those with new diabetes. The frequency of narrowly defined DPN was 2, 1.7, and 7.8 percent in non-IG, IG, and new diabetes subjects, respectively. Using a broader definition, the frequency of DPN was 12.7, 12.6, and 17.4 percent in non-IG, IG, and new diabetes subjects, respectively.

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