# Increased Left Ventricular Mass As A Marker of Left Ventricular Hypertrophy In Normotensive Type2 DM Patients

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By

#### **Mohamed Shaban Hashem Mahmoud**

MSc of Internal Medicine ,Faculty of Medicine, Fayoum University

Under supervision of

#### Dr. Maher Abo Bakr AL Amir

Prof. of internal medicine, Faculty of Medicine, Fayoum University

#### Dr. Mohamed Saleh Gomaa

Lecturer of internal medicine, Faculty of Medicine, Fayoum University

### Dr. Abdel Rahman Ahmed Ewais

Lecturer of internal medicne, Faculty of Medicine, Fayoum University

#### Dr.Mostafa Kamal Eldin Ibrahim

Lecturer of Cardiology, Faculty of Medicine, Fayoum University

**Fayoum University** 

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## Abstract

*Background*: diabetes is one of the most important metabolic conditions responsible for left ventricular (LV) dysfunction including LV hypertrophy. Increased left ventricular mas (LVM) is a strong predictive factor of LV hypertrophy.

*Study purpose, design, and methods:* LVM is suggested to be useful in detection of LVH in diabetics , our study included 100 persons distributed in the 2 groups : Group A (cases) : 50 patients with type 2 DM with normal blood pressure without antihypertensive medication .Group B (controls) : 50 normotensive non-diabetic patients as a control group. LVM was measured by trans-thoracic echocardiography using Devereux Formula.

**Results:** LVM values were significantly higher in cases than controls  $(187.11 \pm 60.83 \text{ vs.} 119.15 \pm 41.87, p<0.001)$ . As well as, LVMI values were significantly higher in diabetic cases than controls  $(96.64 \pm 29.84 \text{ vs.} 63.17 \pm 20.38, p<0.001)$ , Proportion of abnormal LVMI was higher in diabetic cases than controls (56% vs. 6%, p<0.001), There was a statistically significant positive correlation between LVM and several study parameters including mainly disease duration (r=0.369, p=0.008), FBS (r=0.478, p<0.001), 2HPP (0.400, p=0.004), HA1C (%) (r=0.589, p=0.003), LVEDD (r=0.790, p<0.001), LVESD (r=0.388, p=0.005), SWT (r=0.897, p<0.001), PWT (r=0.808, p<0.001), and LA (r=0.322, p=0.022).

*Conclusion:* LVM is significantly higher in normotensive type 2 DM patients when compared to controls. LVM is a good marker of LVH among normotensive diabetics and is markedly correlated with DM control and duration.