CONCLUSIONS

- Physical inactivity and hours of Television viewing were higher in the diabetic group compared to non diabetic group.

- Mean calorie, carbohydrate, protein and fat intakes were higher in the diabetic group.

- Mean BMI was higher in the diabetic group.
• Mean BMI and waist circumference was higher in females in the diabetic group compared to males. Moreover females in the diabetic group had higher BMI and waist circumference compared to the females in the non-diabetic group.

• The need for a healthy lifestyle including diet, exercise and healthy habits should be stressed to all families, especially those who are a high risk for cardiovascular disease.

• Mean values of Total cholesterol, Low Density Lipoprotein cholesterol (LDL), Non High Density lipoprotein (Non HDL) and LDL/HDL were higher for control group. Serum triglycerides were higher among subjects with diabetes along with low High Density lipoprotein (HDL). Gender is correlated with triglyceride, HDL and VLDL. (p value <0.05). Males have got high values for triglyceride and VLDL and low values for HDL.

• TG is associated with BMI among diabetes patients. Value of TG increased with increase in BMI.

• A significantly high value in TG is observed in very poor control of diabetes. Value of triglyceride increased with HbA1c and a significantly high value for triglyceride is observed in the cases with poor diabetic control.

• There was a significant correlation between Apo B & non-HDL cholesterol. Non-HDL cholesterol is considered as a surrogate marker of Apo B which can be easily derived in clinical practice and this is a cheaper test compared to Apo B. Hence in resource poor situations where we cannot go for direct LDL cholesterol measurement especially in the context of high serum triglycerides we can go for non-HDL cholesterol.
estimation. This is especially of use in patients with mixed dyslipidemias.

- Severity of retinopathy increased with increase in Serum TG.

- Neuropathy was correlated with Post-prandial blood sugar, duration of diabetes and urine albumin creatinine ratio. Neuropathy was not found to be associated with total cholesterol, Serum triglycerides, LDL, HDL and non HDL Cholesterol.

- Lipid parameters were not correlated with diabetic nephropathy
LIMITATIONS OF THE STUDY

Included self-reporting of eating patterns.

Duration of diabetes was assessed from the history and records available with the patient. As the patients on Statins were excluded the study may not be the true representation though many of
our patients are not put on statins before a CAD event happened. So the patients with CAD included those with not clinically detected CADs.

This is purely an observational study and so the benefits of interventions could not be assessed.