C

About 1 in 11 adults worldwide now have DM, 90% of who have type 2 diabetes (T2D). Successful glycaemic control helps to prevent and reduce complications of T2D, including disorder, kidney disease, blindness, neuropathy, and limb amputation, and reduce death related to the disease. However, maintaining optimal glycemic control requires on-going monitoring and treatment, which can be costly and challenging. To reinforce diabetes management, the event of innovative self-care strategies is warranted. Advances in health information technologies (HITs) can have been introduced approaches that support e ective and a ordable health-care delivery and patient education.

2. Lu J, Ma X, Zhou J, et al. (2018) Association of Time in Range, as Assessed by Continuous Glucose Monitoring, With Diabetic Retinopathy in Type 2 Diabetes. Diabetes Care 41(11): 2370-2376.

3. Zhao Q, Zhou F, Zhang Y, Zhou X, Ying C (2019) Fasting plasma glucose variability levels and risk of adverse outcomes among patients with type 2 diabetes: A systematic review and meta-analysis. Diabetes Res Clin Pract 148: 23-31.

4. The ACCORD Study Group and ACCORD Eye Study Group, Chew EY, Ambrosius WT, Davis MD, Danis RP, Gangaputra S, et al. (2010) Efects of medical therapies on retinopathy progression in type 2 diabetes. N Engl J Med 363(3): 233-244.

5. Zheng Y, He M, Congdon N (2012) The worldwide epidemic of diabetic retinopathy. Indian J Ophthalmol 60(5): 428-431.

Citation:

Characteristics		Number	Percentage (%)
Age	18-49	115	49%
	>49	160	58.10%
Sex	Male	125	45.45%
	Female	150	54.50%
Marital status	Single	20	7.30%
	Married	181	66%
	Divorced	36	13%
	Widowed	38	13.90%
Religion	Orthodox	70	25.45%
	Muslim	165	60%
	Protestant	25	9.10%
	Catholic	15	5.45%

Citation:

Citation:

Citation: