Sleep Scores Improve With Neuropathy Treatment

**BY KERRI WACHTER**
Senior Writer

WASHINGTON — Not only does duloxetine appear to improve patients’ glycemic control, but it also helps them sleep, according to a small study presented at the annual meeting of the American Diabetes Association. The study was sponsored by Eli Lilly and Co.

The researchers pooled data from three double-blind, placebo-controlled trials involving duloxetine in patients with diabetic peripheral neuropathy, totaling 339 patients. At 12 weeks, patients who were on duloxetine showed improvements in daily average night pain severity (measured on an 11-point Likert scale) and the Brief Pain Inventory sleep interference item. The authors wrote, “We hypothesized that duloxetine treatment would be associated with improvements in pain and sleep interference, as well as residual sleepiness, drowsiness, being drowsy upon awakening, excessive daytime sleepiness, drowsiness, being drowsy upon awakening, excessive daytime sleepiness, drowsiness, being drowsy upon awakening, excessive daytime sleepiness, drowsiness, being drowsy upon awakening, excessive daytime sleepiness, drowsiness, being drowsy upon awakening, excessive daytime sleepiness, drowsiness, being drowsy upon awakening, excessive daytime sleepiness, drowsiness, being drowsy upon awakening, excessive daytime sleepiness, drowsiness, being drowsy upon awakening, excessive daytime sleepiness, drowsiness, being drowsy upon awakening, excessive daytime sleepiness, drowsiness, being drowsy upon awakening, excessive daytime sleepiness, drowsiness, being drowsy upon awakening, excessive daytime sleepiness, drowsiness, being drowsy upon awakening, excessive daytime sleepiness, drowsiness, being drowsy upon awakening, excessive daytime sleepiness, drowsiness, being drowsy upon awakening, excessive daytime sleepiness, drowsiness, being drowsy upon awakening, excessive daytime sleepiness, drowsiness, being drowsy upon awak...”

Giving Insulin at the Dialysis Center Improves Patients’ Glycemic Control

**BY FRAN LOWRY**
Orlando Bureau

It’s like the straw that broke the camel’s back. The patient was 72 years old and had been on maintenance hemodialysis for 3 years. In addition to being hypertensive and having coronary artery disease, the patient had poor glycemic control despite being on maximum doses of two oral hypoglycemic agents. He had had type 2 diabetes for 20 years. Dr. Janga said.

His fasting glucose was more than 200 mg/dL, and greater than 250 mg/dL prelunch. His hemoglobin A1c was 13.3%. He refused to take insulin at home; he was afraid to take it.

The patient was placed on a regimen of Lan-...